

FOI#13948

PLUMBERS AND GASFITTERS LOCAL UNION NO. 1

OF THE

**UNITED ASSOCIATION OF JOURNEYMEN AND APPRENTICES OF THE PLUMBING
AND PIPE FITTING INDUSTRY OF THE UNITED STATES AND CANADA
NEW YORK CITY**

JOHN J. MURPHY
Business Manager

DONALD T. DOHERTY, JR.
Financial Secretary-Treasurer



Freedom of Information Law Request

Business Agent-At-Large
MICHAEL APUZZO

Business Agents
KEVIN BRADY
FREDDY DELLIGATTI
RICHARD GARNER
THOMAS W. KEMPF
DANIEL LUCARELLI
ROBERT MURRAY
PAUL O'CONNOR
ANTHONY RUSSINI
JOHN TOTINO

Organizer
RAYMOND V. RONDINO

President
JOHN HICKEY

Vice President
MICHAEL McGRATH

Recording Sec'y.
CARL L. JOHNSON, JR.

Executive Board
MICHAEL ALOISI
REGINALD JAMES
GEORGE MALANDRAKIS
ALAN PAWELSKY

Finance Committee
DOMINICK BRUNO
CHRIS CONBOY, JR.
BILL SPRINGER

Examining Board
RICHARD GILLIGAN
TOMMY KINIRONS
GREG LOGAN
LOUIS J. PASQUALE
MICHAEL J. REED
TIMOTHY J. SPELLMAN

Inside Sentry
PAUL COTTO

Date: 03/22/13

REF: 032213

Port Authority
Office of the Inspector General
P.O. Box 2018
Hoboken, New Jersey 07030

To Whom it May Concern:

Please accept this letter as my request, pursuant to the New York Freedom of Information Law, Article 6, of the Public Officers Law to obtain copies of the following documents.

1. Copies of certified payrolls records, contract numbers & scope of work submitted by T. Moriarty & Son Inc. for all their work done for the Port Authority for the time period 01/01/10 to the present time.
2. Copies of any sign-in sheets or list of access sheet with the above – referenced project and contractors.
3. Copies of the Award Letter and applicable wage for this project.

I look forward to hearing from you, within the time frame outlined in Article 6, regarding arrangements to obtain these documents. If you prefer, a reply via e-mail will constitute acknowledgment of my request. If you have any questions regarding this request, please do not hesitate to contact me at 718-738-7500 ext 224 or Fdelligatti@ualocal1.org . Future correspondence, if necessary can be directed to my attention to:

Plumbers Local Union No#1
158-29 George Meany Blvd
Howard Beach, NY 11414
Attn: Freddy Delligatti

Sincerely,

Freddy Delligatti
Plumbers Local Union #1
Business Agent

44-59-15A 11:32 RCVD

PHONE (718) 738-7500 • FAX (718) 835-0896 • www.ualocal1.org
158-29 GEORGE MEANY BOULEVARD • HOWARD BEACH, NEW YORK 11414



THE PORT AUTHORITY OF NY & NJ

FOI Administrator

September 10, 2013

Mr. Freddy Delligatti
Plumber and Gasfitters Local Union No. 1
158-29 Geroge Meany Boulevard
Howard Beach, NY 11414

Re: Freedom of Information Reference No. 13948

Dear Mr. Delligatti:

This is a response to your March 22, 2013 request, which has been processed under the Port Authority's Freedom of Information Code (the "Code"), for copies of certified payrolls records, contract numbers & scope of work submitted by T. Moriarty & Son Inc. for all their work done for the Port Authority for the time period 1/1/10 to the present, copies of any sign-in sheets or list of access sheet, and copies of the award letter and applicable wage for this project.

Material responsive to your request and available under the Code for certified payroll records, contract numbers and scope of work, copy of the award letter and applicable wage provisions can be found on the Port Authority's website at <http://www.panynj.gov/corporate-information/foi/13948-WTC.pdf>. Please be advised that we have searched our files and do not find any records responsive to your request as to sign-in sheets or access sheets.

Certain material responsive to your request is exempt from disclosure pursuant to exemption (1) under the Code.

Please refer to the above FOI reference number in any future correspondence relating to your request.

Very truly yours,



Ann L. Qureshi
FOI Administrator

225 Park Avenue South, 17th Floor
New York, NY 10003
T: 212 435 3642
F: 212 435 7555



THE PORT AUTHORITY OF NY & NJ

Lillian D. Valenti
Director, Procurement Department

July 15, 2009

VIA FACSIMILE AND UPS NEXT DAY DELIVERY

T. Moriarty & Son, Inc.
63 Creamer Street
Brooklyn, New York 11231

**SUBJECT: GENERAL SITE WORK VIA WORK ORDER – CONTRACT WTC-614.001Y
PURCHASE ORDER WTC614001Y - WORK ORDER NO. 15 –
FOUNDATIONS AND STAIRS MODIFICATIONS**

Gentlemen:

The Port Authority of New York and New Jersey (“Port Authority”) hereby accepts T. Moriarty & Son, Inc.’s (“Moriarty”) Proposal dated June 16, 2009 to perform all the Work under Work Order No. 15 for Nine Million Two Hundred Thirty Thousand (\$9,230,000.00) Dollars in accordance with provisions of Contract WTC-614.001Y as amended by Supplemental Agreement No. 1 dated May 19, 2009 and the requirements set forth in the Request For Proposal for Work Order No. 15 including Attachments A through F and S.

The Port Authority requires you to furnish a Performance Bond and a Payment Bond. Copies of the required bond forms are enclosed, which should be executed by Moriarty and its surety and returned within seven (7) days to Terri Flores of the Port Authority, 1 Madison Avenue, 7th Floor, New York, NY 10010 **along with a copy of the invoice from the bonding company and bond broker if applicable, for the premium for said bond.**

The Agreement to perform the all the Work under Work Order No. 15 shall consist of the following, stated in order of precedence in case of conflict or inconsistency:

1. This letter of acceptance
2. Addenda No. 1 through No. 5 of the Request For Proposal for Work Order No. 15
3. The Request For Proposal For Work Order No. 15 including Attachments A through F and S
4. Contract WTC-614.001Y as amended by Supplemental Agreement No. 1 dated May 19, 2009.

Your attention is directed to the Attachment C of the Request For Proposal for Work Order No. 15 entitled “Time for Completion and Damages for Delay” and to the fact that before you may commence performance of the work you must furnish whichever of the documents mentioned in Attachment C that are applicable.

1 Madison Avenue, 7th Floor
New York, NY 10010
T: 212 435 8427



THE PORT AUTHORITY OF NY & NJ

Subject to the provisions of the Form of Contract, including those of the clause entitled "Extra Work Orders", the Director shall have the authority to order any item of Extra Work.

If the above meets with Moriarty's approval, please indicate Moriarty's concurrence by countersigning the enclosed duplicate original of this letter and returning it to Ms. Terri Flores, The Port Authority of New York and New Jersey, One Madison Avenue, 7th Floor, New York, NY 10010.

In order to ensure that payments are processed properly, please include the above-referenced Purchase Order No. and Work Order No. on all payment invoices and correspondence.

Very truly yours,

THE PORT AUTHORITY OF NEW YORK
AND NEW JERSEY

BY *Luis Vacante*
Director of Procurement

CORPORATE SEAL

ACCEPTED AND AGREED TO:
T. MORIARTY & SON, INC.

By: *James Moriarty Jr.*
(Signature of Officer of T. Moriarty & Son, Inc.)

James Moriarty Jr.
(Type or Print Name of Officer of T. Moriarty & Son, Inc.)

7-17-09
(Type or Print Date)

43A. PREVAILING RATE OF WAGE

The Contractor shall pay or provide (and shall cause all subcontractors to pay or provide) to his or their workmen, laborers and mechanics (who are employed by him or them to work on an hourly or daily basis at any trade or occupation at or about the construction site) at least the prevailing rate of wage and supplements for others engaged in the same trade or occupation at the time and in the locality in which the Work is being performed in accordance with the provisions of the clause entitled "Davis-Bacon and Anti-Kickback Acts Contracts Exceeding \$2,000" as determined by the Engineer.

For purposes of this Contract, the Engineer has determined that the prevailing rates of wage and supplements are those established by the Secretary of Labor of the United States pursuant to the Davis-Bacon Act (40 U.S.C.A. 276a) for the locality in which the Work is to be performed. The schedule of wages and supplemental benefits which are currently in effect is attached hereto. However, the applicable rates shall be those which are in effect at the time the work is performed. Although the wage and supplements determination of the Secretary may change during the term of this Contract, and the Contractor shall be bound to pay the revised amounts, no change in lump sum, unit price or combination of lump sum and unit price compensation to the Contractor shall be due based upon a change in the Secretary's determinations of wages or benefits.

The provisions of this numbered clause are inserted in this Contract for the benefit of such workmen, laborers and mechanics as well as for the benefit of the Authority; and if the Contractor or any subcontractor shall pay or provide any such workman, laborer or mechanic less than the rates of wages and supplements above described, such workman, laborer or mechanic shall have a direct right of action against the Contractor or such subcontractor for the difference between the wages and supplements actually paid or provided and those to which he is entitled under this clause. If such workman, laborer or mechanic is employed by any subcontractor whose subcontract does not contain a provision substantially similar to the provisions of this clause (requiring the payment or provision of at least the above minimum, and providing for a cause of action in the event of the subcontractor's failure to pay or provide such wages and supplements) such workman, laborer or mechanic shall have a direct right of action against the Contractor. The Authority shall not be a necessary party to any action brought by any workman, laborer or mechanic to obtain a money judgment against the Contractor or any subcontractor pursuant to this numbered clause.

Nothing herein contained shall be construed to prevent the Contractor or any subcontractor from paying higher rates of wages or providing higher supplements than the minimum hereinbefore prescribed; and nothing herein contained shall be construed to constitute a representation or guarantee that the Contractor or any subcontractor can obtain workmen, laborers and mechanics for the minimum herein before prescribed. All wages actually paid that are in excess of the prevailing wages in the performance of Extra Work shall be subject, on each occasion, to the initial and continuing approval of the Engineer in advance of the performance of such Extra Work. The Contractor shall post at the Work site, in a place that is prominent, accessible and visible to all employees of the Contractor and its subcontractors during the daily time period that the Contractor and/or subcontractor performs Work at the site, the appropriate prevailing wage and supplement schedules. The Contractor must inform all employees, including those of its subcontractors, that they may obtain a copy of the prevailing wage and supplement schedule from the Contractor. The Contractor and every subcontractor shall make and maintain weekly payroll records during the course of the Work and for the period set forth in the clause hereof entitled "Authority Access to Records" for all employees employed in the Work. Such records shall contain the name, address and social security number of each such employee, the employee's correct payroll classification, rate of pay and supplements, daily and weekly number of hours worked, deductions made and actual wages and supplements paid. The Contractor shall submit these weekly payroll records to the Authority (on forms furnished by the Authority) of all his payroll records and those of each of his subcontractors as the Authority may require with the Contractor's monthly Payment Application, together with an affidavit by the Contractor and by each subcontractor to the effect that such payroll records are correct and complete, the wage and supplement rates contained therein are not less than those required by the provisions of this Contract, and the classifications set forth for each employee conform with the work performed. Such copies and summaries and the original payroll records shall be available for inspection by the Authority (including its Inspector General), and the Contractor and its subcontractors shall permit such representatives to interview employees during working hours on the job site.

The Engineer may at any time request the Contractor to prepare a daily report on the Authority form entitled *Contractor Daily Sign-In Sheet*, copies of which can be obtained from the Engineer. The *Contractor Daily Sign-In Sheet* shall be completed as follows:

- 1.) At the beginning of each workday the Contractor shall:
 - a. fill in the top of the *Contractor Daily Sign-In Sheet*, including the location, date, contractor/subcontractor name and contract number;
 - b. ensure that each employee, including those of subcontractors, has printed and signed his or her name and indicated his or her work classifications, the last four digits of his or her social security number, and his or her starting time;
- 2.) At the end of each workday, the Contractor shall:
 - a. ensure that each employee, including those of subcontractors, has signed out and indicated his or her ending time;
 - b. sign the Certification Statement at the bottom of the form to indicate that the information contained in the *Contractor Daily Sign-In Sheet* is true and accurate; and
 - c. submit the original completed form to the Engineer's representative.

In an area of his office at the Site of the Work which is accessible to his employees, the Contractor shall display such printed material as may be provided by the Engineer setting forth information for the employees of the Contractor and his subcontractors concerning the wage and supplemental benefit requirements set forth in this numbered clause. The Contractor shall also cause each of his subcontractors to display such material in a similarly accessible place in any office which the subcontractor maintains at the Site of the Work.

The Contractor's failure to comply with any provision of this numbered clause shall be deemed a substantial breach of this Contract.

**59J. DAVIS-BACON AND COPELAND ANTI-KICKBACK ACTS – CONTRACTS
EXCEEDING \$2000**

The Davis-Bacon and Copeland Acts are codified at 40 USC 3141, *et seq.* and 18 USC 874. The Acts apply to grantee construction contracts and subcontracts that “at least partly are financed by a loan or grant from the Federal Government.” 40 USC 3145(a), 29 CFR 5.2(h), 49 CFR 18.36(i)(5). The Acts apply to any construction contract over \$2,000. 40 USC 3142(a), 29 CFR 5.5(a). ‘Construction,’ for purposes of the Acts, includes “actual construction, alteration and/or repair, including painting and decorating.” 29 CFR 5.5(a). The requirements of both Acts are

incorporated into a single clause (*see* 29 CFR 3.11) enumerated at 29 CFR 5.5(a) and reproduced below and are applicable if this Contract is a construction contract (as delineated above) over \$2000.

A. Minimum Wages

1. All laborers and mechanics employed or working upon the site of the work (or under the United States Housing Act of 1937 or under the Housing Act of 1949 in the construction or development of the project), will be paid unconditionally and not less often than once a week, and without subsequent deduction or rebate on any account (except such payroll deductions as are permitted by regulations issued by the Secretary of Labor under the Copeland Act (29 CFR part 3)), the full amount of wages and bona fide fringe benefits (or cash equivalents thereof) due at time of payment computed at rates not less than those contained in the wage determination of the Secretary of Labor which, if applicable, is attached hereto and made a part hereof (the attachment is the most current determination), regardless of any contractual relationship which may be alleged to exist between the Contractor and such laborers and mechanics. Determinations may change during the term of the Contract, and the wages and fringe benefits required by the most recent determination of the Secretary of Labor are those to be used.

Contributions made or costs reasonably anticipated for bona fide fringe benefits under section 1(b)(2) of the Davis-Bacon Act on behalf of laborers or mechanics are considered wages paid to such laborers or mechanics, subject to the provisions of paragraph (A)(4) of this Section; also, regular contributions made or costs incurred for more than a weekly period (but not less often than quarterly) under plans, funds, or programs which cover the particular weekly period, are deemed to be constructively made or incurred during such weekly period. Such laborers and mechanics shall be paid the appropriate wage rate and fringe benefits on the wage determination for the classification of work actually performed, without regard to skill, except as provided in 29 CFR Part 5.5(a)(4). Laborers or mechanics performing work in more than one classification may be compensated at the rate specified for each classification for the time actually worked therein: Provided, That the employer's payroll records accurately set forth the time spent in each classification in which work is performed. The wage determination (including

any additional classifications and wage rates conformed under paragraph (A)(2) of this Section) and the Davis-Bacon poster (WH-1321) shall be posted at all times by the Contractor and its subcontractors at the site of the work in a prominent and accessible place where it can be easily seen by the workers.

2. a. The contracting officer shall require that any class of laborers or mechanics, including helpers, which is not listed in the wage determination and which is to be employed under the contract shall be classified in conformance with the wage determination. The contracting officer shall approve an additional classification and wage rate and fringe benefits therefore only when the following criteria have been met:
 - (i) Except with respect to helpers as defined as 29 CFR 5.2(n)(4), the work to be performed by the classification requested is not performed by a classification in the wage determination;
 - (ii) The classification is utilized in the area by the construction industry;
 - (iii) The proposed wage rate, including any bona fide fringe benefits, bears a reasonable relationship to the wage rates contained in the wage

determination; and

- (iv) With respect to helpers as defined in 29 CFR 5.2(n)(4), such a classification prevails in the area in which the work is performed.
- a. If the contractor and the laborers and mechanics to be employed in the classification (if known), or their representatives, and the contracting officer agree on the classification and wage rate (including the amount designated for fringe benefits where appropriate), a report of the action taken shall be sent by the contracting officer to the Administrator of the Wage and Hour Division, Employment Standards Administration, U.S. Department of Labor, Washington, DC 20210. The Administrator, or an authorized representative, will approve, modify, or disapprove every additional classification action within 30 days of receipt and so advise the contracting officer or will notify the contracting officer within the 30-day period that additional time is necessary.
 - b. In the event the Contractor, the laborers or mechanics to be employed in the classification or their representatives, and the contracting officer do not agree on the proposed classification and wage rate (including the amount designated for fringe benefits, where appropriate), the contracting officer shall refer the questions, including the views of all interested parties and the recommendation of the contracting officer, to the Administrator for determination. The Administrator, or an authorized representative, will issue a determination within 30 days of receipt and so advise the contracting officer or will notify the contracting officer within the 30-day period that additional time is necessary.
 - c. The wage rate (including fringe benefits where appropriate) determined

pursuant to paragraphs A (2)(ii) (b) or (c) of this Section, shall be paid to all workers performing work in the classification under this Contract from the first day on which work is performed in the classification.

3. Whenever the minimum wage rate prescribed in the contract for a class of laborers or mechanics includes a fringe benefit which is not expressed as an hourly rate, the Contractor shall either pay the benefit as stated in the wage determination or shall pay another bona fide fringe benefit or an hourly cash equivalent thereof.
4. If the Contractor does not make payments to a trustee or other third person, the Contractor may consider as part of the wages of any laborer or mechanic the amount of any costs reasonably anticipated in providing bona fide fringe benefits under a plan or program, Provided, That the Secretary of Labor has found, upon the written request of the Contractor, that the applicable standards of the Davis-Bacon Act have been met. The Secretary of Labor may require the Contractor to set aside in a separate account assets for the meeting of obligations under the plan or program.
5.
 - a. The contracting officer shall require that any class of laborers or mechanics which is not listed in the wage determination and which is to be employed under the contract shall be classified in conformance with the wage determination. The contracting officer shall approve an additional classification and wage rate and fringe benefits therefor only when the following criteria have been met:
 - (i) The work to be performed by the classification requested is not performed by a classification in the wage determination;
 - (ii) The classification is utilized in the area by the construction industry; and
 - (iii) The proposed wage rate, including any bona fide fringe benefits, bears a reasonable relationship to the wage rates contained in the wage determination.
 - b. If the Contractor and the laborers and mechanics to be employed in the classification (if known), or their representatives, and the contracting officer agree on the classification and wage rate (including the amount designated for fringe benefits where appropriate), a report of the action taken shall be sent by the contracting officer to the Administrator of the Wage and Hour Division, Employment Standards Administration, Washington, DC 20210. The Administrator, or an authorized representative, will approve, modify, or disapprove every additional classification action within 30 days of receipt and so advise the contracting officer or will notify the contracting officer within the 30-day period that additional time is necessary.
 - c. In the event the Contractor, the laborers or mechanics to be employed in the classification or their representatives, and the contracting officer do not agree on the proposed classification and wage rate (including the amount designated for fringe benefits, where appropriate), the contracting officer shall refer the questions, including the views of all interested parties and the

recommendation of the contracting officer, to the Administrator for determination. The Administrator, or an authorized representative, will issue a determination with 30 days of receipt and so advise the contracting officer or will notify the contracting officer within the 30-day period that additional time is necessary.

- d. The wage rate (including fringe benefits where appropriate) determined pursuant to paragraphs A (2)(ii)(b) or (c) of this Section, shall be paid to all workers performing work in the classification under this Contract from the first day on which work is performed in the classification.

B. Withholding

The Authority shall upon its own action or upon written request of an authorized representative of the Department of Labor withhold or cause to be withheld from the Contractor under this Contract or any other Federal contract with the same prime contractor, or any other federally-assisted contract subject to Davis-Bacon prevailing wage requirements, which is held by the same prime contractor, so much of the accrued payments or advances as may be considered necessary to pay laborers and mechanics, including apprentices, trainees, and helpers, employed by the Contractor or any subcontractor the full amount of wages required by the contract. In the event of failure to pay any laborer or mechanic, including any apprentice, trainee, or helper, employed or working on the site of the work (or under the United States Housing Act of 1937 or under the Housing Act of 1949 in the construction or development of the project), all or part of the wages required by the contract, the Authority may, after written notice to the Contractor, sponsor, applicant, or owner, take such action as may be necessary to cause the suspension of any further payment, advance, or guarantee of funds until such violations have ceased.

C. Payrolls and Basic Records

1. Payrolls and basic records relating thereto shall be maintained by the Contractor during the course of the work and preserved for a period of three years thereafter for all laborers and mechanics working at the site of the work (or under the United States Housing Act of 1937, or under the Housing Act of 1949, in the construction or development of the project). Such records shall contain the name, address, and social

security number of each such worker, his or her correct classification, hourly rates of wages paid (including rates of contributions or costs anticipated for bona fide fringe benefits or cash equivalents thereof of the types described in section 1(b)(2)(B) of the Davis-Bacon Act), daily and weekly number of hours worked, deductions made and actual wages paid. Whenever the Secretary of Labor has found under 29 CFR 5.5(a)(1)(iv) that the wages of any laborer or mechanic include the amount of any costs reasonably anticipated in providing benefits under a plan or program described in section 1(b)(2)(B) of the Davis-Bacon Act, the Contractor shall maintain records which show that the commitment to provide such benefits is enforceable, that the plan or program is financially responsible, and that the plan or program has been communicated in writing to the laborers or mechanics affected, and records which show the costs anticipated or the

actual cost incurred in providing such benefits. Contractors employing apprentices or trainees under approved programs shall maintain written evidence of the registration of apprenticeship programs and certification of trainee programs, the registration of the apprentices and trainees, and the ratios and wage rates prescribed in the applicable programs.

2. a. The Contractor shall submit weekly for each week in which any contract work is performed a copy of all payrolls to the Authority for transmission to the Federal Transit Administration. The payrolls submitted shall set out accurately and completely all of the information required to be maintained under section 5.5(a)(3)(i) of Regulations, 29 CFR part 5. This information may be submitted in any form desired. Optional Form WH-347 is available for this purpose and may be purchased from the Superintendent of Documents (Federal Stock Number 029-005-00014-1), U.S. Government Printing Office, Washington, DC 20402. The prime contractor is responsible for the submission of copies of payrolls by all subcontractors.
 - b. Each payroll submitted shall be accompanied by a "Statement of Compliance," signed by the Contractor or subcontractor or his or her agent who pays or supervises the payment of the persons employed under the contract and shall certify the following:
 - (i) That the payroll for the payroll period contains the information required to be maintained under section 5.5(a)(3)(i) of Regulations, 29 CFR part 5 and that such information is correct and complete;
 - (ii) That each laborer or mechanic (including each helper, apprentice, and trainee) employed on the contract during the payroll period has been paid the full weekly wages earned, without rebate, either directly or indirectly, and that no deductions have been made either directly or indirectly from the full wages earned, other than permissible deductions as set forth in Regulations, 29 CFR part 3;
 - (iii) That each laborer or mechanic has been paid not less than the applicable wage rates and fringe benefits or cash equivalents for the classification of work performed, as specified in the applicable wage determination incorporated into the contract.
 - c. The weekly submission of a properly executed certification set forth on the reverse side of Optional Form WH-347 shall satisfy the requirement for submission of the "Statement of Compliance" required by paragraph C(2)(b) of this Section.
 - d. The falsification of any of the above certifications may subject the Contractor or subcontractor to civil or criminal prosecution under section 1001 of title 18 and section 231 of title 31 of the United States Code.
3. The Contractor or subcontractor shall make the records required under paragraph C(1) of this Section available for inspection, copying, or transcription by authorized representatives of the Federal Transit Administration or the Department of Labor, and shall permit such representatives to interview employees during working hours on the job. If the Contractor or subcontractor

fails to submit the required records or to make them available, the Federal agency may, after written notice to the Contractor, sponsor, applicant, or owner, take such action as may be necessary to cause the suspension of any further payment, advance, or guarantee of funds. Furthermore, failure to submit the required records upon request or to make such records available may be grounds for debarment action pursuant to 29 CFR 5.12.

D. Apprentices and Trainees

1. Apprentices - Apprentices will be permitted to work at less than the predetermined rate for the work they performed when they are employed pursuant to and individually registered in a bona fide apprenticeship program registered with the U.S. Department of Labor, Employment and Training Administration, Bureau of Apprenticeship and Training, or with a State Apprenticeship Agency recognized by the Bureau, or if a person is employed in his or her first 90 days of probationary employment as an apprentice in such an apprenticeship program, who is not individually registered in the program, but who has been certified by the Bureau of Apprenticeship and Training or a State Apprenticeship Agency (where appropriate) to be eligible for probationary employment as an apprentice. The allowable ratio of apprentices to journeymen on the job site in any craft classification shall not be greater than the ratio permitted to the Contractor as to the entire work force under the registered program. Any worker listed on a payroll at an apprentice wage rate, who is not registered or otherwise employed as stated above, shall be paid not less than the applicable wage rate on the wage determination for the classification of work actually performed. In addition, any apprentice performing work on the job site in excess of the ratio permitted under the registered program shall be paid not less than the applicable wage rate on the wage determination for the work actually performed. Where a Contractor is performing construction on a project in a locality other than that in which its program is registered, the ratios and wage rates (expressed in percentages of the journeyman's hourly rate) specified in the Contractor's or subcontractor's registered program shall be observed. Every apprentice must be paid at not less than the rate specified in the registered program for the apprentice's level of progress, expressed as a percentage of the journeymen hourly rate specified in the applicable wage determination. Apprentices shall be paid fringe benefits in accordance with the provisions of the apprenticeship program. If the apprenticeship program does not specify fringe benefits, apprentices must be paid the full amount of fringe benefits listed on the wage determination for the applicable classification. If the Administrator of the Wage and Hour Division of the U.S. Department of Labor determines that a different practice prevails for the applicable apprentice classification, fringes shall be paid in accordance with that determination. In the event the Bureau of Apprenticeship and Training, or a State Apprenticeship Agency recognized by the Bureau, withdraws approval of an apprenticeship program, the Contractor will no longer be permitted to utilize apprentices at less than the applicable predetermined rate for the work performed until an acceptable program is approved.

2. Trainees - Except as provided in 29 CFR 5.16, trainees will not be permitted to work at less than the predetermined rate for the work performed unless they are employed pursuant to and individually registered in a program which has received prior approval, evidenced by formal certification by the U.S. Department of Labor, Employment and Training Administration. The ratio of trainees to journeymen on the job site shall not be greater than permitted under the plan approved by the Employment and Training Administration. Every trainee must be paid at not less than the rate specified in the approved program for the trainee's level of progress, expressed as a percentage of the journeyman hourly rate specified in the applicable wage determination. Trainees shall be paid fringe benefits in accordance with the provisions of the trainee program. If the trainee program does not mention fringe benefits, trainees shall be paid the full amount of fringe benefits listed on the wage determination unless the Administrator of the Wage and Hour Division determines that there is an apprenticeship program associated with the corresponding journeyman wage rate on the wage determination which provides for less than full fringe benefits for apprentices. Any employee listed on the payroll at a trainee rate who is not registered and participating in a training plan approved by the Employment and Training Administration shall be paid not less than the applicable wage rate on the wage determination for the classification of work actually performed. In addition, any trainee performing work on the job site in excess of the ratio permitted under the registered program shall be paid not less than the applicable wage rate on the wage determination for the work actually performed. In the event the Employment and Training Administration withdraws approval of a training program, the Contractor will no longer be permitted to utilize trainees at less than the applicable predetermined rate for the work performed until an acceptable program is approved.
3. Equal employment opportunity - The utilization of apprentices, trainees and journeymen under this part shall be in conformity with the equal employment opportunity requirements of Executive Order 11246, as amended, and 29 CFR part 30.

E. Compliance with Copeland Act Requirements

The Contractor shall comply with the requirements of 29 CFR part 3, which are incorporated by reference in this Contract.

F. Subcontracts

The Contractor or subcontractor shall insert in any subcontracts the clauses contained in 29 CFR 5.5(a)(1) through (10) and such other clauses as the Federal Transit Administration may by appropriate instructions require, and also a clause requiring the subcontractors to include these clauses in any lower tier subcontracts. The prime contractor shall be responsible for the compliance by any subcontractor or lower tier subcontractor with all the contract clauses in 29 CFR 5.5.

A. Contract Termination: Debarment

A breach of the contract clauses in 29 CFR 5.5 may be grounds for termination of the contract, and for debarment as a contractor and a subcontractor as provided in 29 CFR 5.12.

B. Compliance with Davis-Bacon and Related Act Requirements

All rulings and interpretations of the Davis-Bacon and Related Acts contained in 29 CFR parts 1, 3, and 5 are herein incorporated by reference in this Contract.

C. Disputes Concerning Labor Standards

Disputes arising out of the labor standards provisions of this Contract shall not be subject to the general disputes clause of this Contract. Such disputes shall be resolved in accordance with the procedures of the Department of Labor set forth in 29 CFR parts 5, 6, and 7. Disputes within the meaning of this clause include disputes between the Contractor (or any of its subcontractors) and the contracting agency, the U.S. Department of Labor, or the employees or their representatives.

D. Certification of Eligibility -

1. By entering into this Contract, the Contractor certifies that neither it (nor he or she) nor any person or firm who has an interest in the Contractor's firm is a person or firm ineligible to be awarded Government contracts by virtue of section 3(a) of the Davis-Bacon Act or 29 CFR 5.12(a)(1).
2. No part of this Contract shall be subcontracted to any person or firm ineligible for award of a Government contract by virtue of section 3(a) of the Davis-Bacon Act or 29 CFR 5.12(a)(1).
3. The penalty for making false statements is prescribed in the U.S. Criminal Code, 18 U.S.C. 1001.

Date 02-24-10

I, Anthony Marco Executive Vice President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

T. Moriarty & Son, Inc.

(Contractor or Subcontractor)

on the

UTC-614-001 WO#15

(Building or Work)

that during the payroll period commencing on the

31st day of December, 2009, and ending the 27th day of January, 2010,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

T. Moriarty & Son, Inc.

(Contractor or Subcontractor)

from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

FRANCOIS SACHAALANY
Commissioner of Deeds
City of New York, No. 2-10704
Qualified in Kings County
Commission Expires Jan. 1, 2011

NAME AND TITLE
Anthony Marco
Executive Vice President

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 20	JOB NO. 91415	WEEK ENDING 01/13/10	EARLY WKS FOUND	PROJECT AND LOCATIONS	PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS				DEDUCTIONS			NET PAY					
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	OTHER	VAC	TAX	GOVERNMENT	OTHER							
61941	MONTES, BALTAZAR F	V	10	LA-LABORE	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL			
					80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0
					TOTAL					TOTAL EARNINGS 189852				TOTAL DEDUCTIONS			28481				
19151	BONGIORNO, PETER P	V	14	OE-OP ENG	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL			
					0	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	
					TOTAL					TOTAL EARNINGS 62272				TOTAL DEDUCTIONS			28484				
59059	MARTINS, JOSE M	V	14	OE-OP ENG	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL			
					0	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	
					TOTAL					TOTAL EARNINGS 40341				TOTAL DEDUCTIONS			28485				
76539	RESENDE, EDGAR	Y	14	OE-OP ENG	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL			
					0	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	
					TOTAL					TOTAL EARNINGS 70392				TOTAL DEDUCTIONS			28486				
79365	SAVINO, JAMES M	Y	14	OE-OP ENG	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL			
					80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	
					TOTAL					TOTAL EARNINGS 217952				TOTAL DEDUCTIONS			28487				
59037	MARTINEZ, ROBERTO L	Y	15	OE-OP ENG	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL			
					0	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	
					TOTAL					TOTAL EARNINGS 89232				TOTAL DEDUCTIONS			28490				

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 20	JOB NO. 91415	WEEK ENDING 01/13/10	EARLY WKS FOUND	PROJECT AND LOCATIONS	PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS				NET PAY											
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	EXP	ANN	OTH	REG	GOVERNMENT	OTHER														
78419	RUMBLE, AUSTIN	Y	36640 15	0	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL	ADJ	102592	TOTAL EARNINGS	102592	TOTAL DEDUCTIONS	28476	
				731	LA-ENG	LA	0	0	80	0	80	0	0	0	0	0	0	0	0	0	0								0
				JB																									
78441	RUIZ, JUAN CHAVEZ	V	36640 15	0	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL	ADJ	190528	TOTAL EARNINGS	190528	TOTAL DEDUCTIONS	28477		
				731	LA-ENG	LA	80	0	80	0	80	0	0	0	0	0	0	0	0	0								0	0
				JS																									
91146	VIANI, ENRICO	V	39140 SR20	0	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL	ADJ	62624	TOTAL EARNINGS	62624	TOTAL DEDUCTIONS	28479		
				731	LA-ENG	LA	0	0	80	0	80	0	0	0	0	0	0	0	0	0								0	0
				JS																									
91146	VIANI, ENRICO	V	39140 15	0	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL	ADJ	203528	TOTAL EARNINGS	203528	TOTAL DEDUCTIONS	28479		
				731	LA-ENG	LA	80	0	80	0	80	0	0	0	0	0	0	0	0	0								0	0
				JS																									
Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL	ADJ	TOTAL EARNINGS	TOTAL EARNINGS	TOTAL DEDUCTIONS	TOTAL DEDUCTIONS	NET PAY	
				731	LA-ENG	LA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0								0
				DEP																									

VOLUNTARY DEDUCTIONS:
UNION DEDUCTIONS

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
46-PAYS
JOURNEYMAN
APPRENTICE
TRAINEE

ST	OT	REG.	OT	OTHER	VAC	SUI	CHECK TOTAL
12560	3375	4546888	2080819	126153	484788	0	4427168
STATE	VAC	STMP	CITY	UNION	TOT REP	NET EARN	
						4299378	

O-(CO)

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 21	JOB NO. 91415	WEEK ENDING 01/20/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS										DEDUCTIONS		NET PAY														
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	TAX	EX	OT	OTH	F	S	V	GOVERNMENT	OTHER																
38852	GRAMER, ROBERT J	V	41.140	1.5	M	T	W	T	S	R	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL 49368	TOTAL DEDUCTIONS	28571		
					731	LA-ENG LA	T	F	S	S	S	R	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
					F	41.140	1.5	0	0	0	0	0	80	TOTAL	49368	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
39204	GREEN, DONALD	Y	36640	1.5	M	T	W	T	S	R	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL 58624	TOTAL DEDUCTIONS	HAND-CO. 610		
					731	LA-ENG LA	T	F	S	S	S	R	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
					JB	36640	1.5	0	0	0	0	0	160	TOTAL	58624	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
39204	GREEN, DONALD	V	36640	1.5	M	T	W	T	S	R	0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL 29312	TOTAL DEDUCTIONS	HAND-CO. 608		
					731	LA-ENG LA	T	F	S	S	S	R	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
					JB	36640	1.5	0	0	0	0	0	80	TOTAL	29312	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
39589	GUEJO, LEONEL GONCA	V	36640	1.5	M	T	W	T	S	R	80	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL 190528	TOTAL DEDUCTIONS	28572		
					731	LA-ENG LA	T	F	S	S	S	R	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
					JS	36640	1.5	80	0	0	0	0	400	TOTAL	190528	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
64218	NERO, EUSTACE W	Y	36640	1.5	M	T	W	T	S	R	80	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL 219840	TOTAL DEDUCTIONS	28577		
					731	LA-ENG LA	T	F	S	S	S	R	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
					JS	36640	1.5	80	0	0	0	0	480	TOTAL	219840	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
66165	OCEGUERA, ALFONSO	Y	36640	1.5	M	T	W	T	S	R	80	0	0	0	0	90	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTAL 225336	TOTAL DEDUCTIONS	28578		
					731	LA-ENG LA	T	F	S	S	S	R	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0
					JS	36640	1.5	80	0	0	0	0	480	TOTAL	225336	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0	0

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE
B
O
U
N
D
A
R
Y

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP		CITY	UNION	TOT DED	NET EARN	EXP		

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 22	JOB NO. 91415	WEEK ENDING 01/27/10	EARLY WKS FOUND	PROJECT AND LOCATIONS	PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS				DEDUCTIONS		NET PAY				
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	OTHER	GOVERNMENT	OTHER								
21505	CARDENAS, JUAN C	Y		M		T		S		R										
				731	LA-ENG LA	80	0	80	0										CHECK NO.	
			36640 15	80	0	400	0	TOTAL											28660	
25487	DAUD, MUAYYAD M	Y		M		T		S		R										
				731	LA-ENG LA	0	0	80	5											CHECK NO.
			36640 15	0	0	80	5	TOTAL											28662	
26983	DONNELLY, JOHN	Y		M		T		S		R										
				731	LA-ENG LA	80	0	80	20											CHECK NO.
			35640 15	80	0	400	20	TOTAL											28664	
29029	EDWARDS, LINUS	Y		M		T		S		R										
				731	LA-ENG LA	80	0	80	15											CHECK NO.
			36640 15	80	0	400	15	TOTAL											28665	
32846	EUYOQUE, EDUARDO	Y		M		T		S		R										
				731	LA-ENG LA	60	0	80	80											CHECK NO.
			36640 15	80	0	380	80	TOTAL											28666	
35464	FITZGERALD, JOE A	Y		M		T		S		R										
				731	LA-ENG LA	80	0	80	20											CHECK NO.
			36640 15	80	0	400	35	TOTAL											28667	

CODE 1 OPP. ENG. CODE CLASSIFICATIONS	CODE 2 J - JOURNEYMAN A - APPRENTICE T - TRAINEE	ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
		STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

**MONTHLY EMPLOYMENT
UTILIZATION REPORT**

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD

MINORITY: _____

FROM: 12/31/09

FEMALE: _____

TO: 01/27/10

This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

2. EMPLOYERS ID NO

91415 EARLY WKS FOUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL FUNDING AGENCY

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)												9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES	
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE				
		M	F	M	F	M	F	M	F	M	F						
10 LA-LABORER	Journey worker	194.5	.0	.0	.0	8.0	.0	.0	.0	.0	.0	4.1	.0	3	0	1	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	194.5	.0	.0	.0	8.0	.0	.0	.0	.0	.0	4.1	.0	3	0	1	0
14 OE-OP ENGI	Journey worker	238.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	238.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	6	0	0	0
15 OE-OP ENGI	Journey worker	190.0	.0	16.0	.0	144.0	.0	.0	.0	.0	.0	.0	.0	6	0	0	0
	APPRENTICE											84.2	.0	5	0	2	0
	TRAINEE																
	SUB-TOTAL	190.0	.0	16.0	.0	144.0	.0	.0	.0	.0	.0	84.2	.0	5	0	2	0
29 LA-LA DRIL	Journey worker	1236.0	.0	328.0	.0	171.5	.0	.0	.0	.0	.0	40.4	.0	8	0	3	0
	APPRENTICE																
	TRAINEE (F)	185.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	SUB-TOTAL	1421.5	.0	328.0	.0	171.5	.0	.0	.0	.0	.0	35.1	.0	9	0	3	0
46 LT-LATHERS	Journey worker																
	APPRENTICE																
	TRAINEE (F)	216.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	SUB-TOTAL	216.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
TOTAL JOURNEY WORKERS																	
TOTAL APPRENTICES																	
TOTAL TRAINEES																	
GRAND TOTAL																	

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (Include area code)

13. DATE SIGNED

PAGE 1 OF _____

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

**MONTHLY EMPLOYMENT
UTILIZATION REPORT**

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD
FROM: 12/31/09

MINORITY: _____

TO: 01/27/10

FEMALE: _____

This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

2. EMPLOYERS I.D. NO.

91415 EARLY WKS FOUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL
FUNDING
AGENCY

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES	
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE				M	F	M	F
		M	F	M	F	M	F	M	F	M	F						
60 LA-WC LABO	Journey worker	8.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	8.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
79 LA-MAS TEN	Journey worker	144.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	APPRENTICE																
	TRAINEE																
	(F)	35.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
SUB-TOTAL	179.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0	
100 CA-CARPENT	Journey worker	183.5	.0	183.5	.0	.0	.0	.0	.0	.0	.0	100.0	.0	1	0	1	0
	APPRENTICE																
	TRAINEE																
	(F)	45.0	.0	.0	.0	16.0	.0	.0	.0	.0	.0	35.6	.0	2	0	1	0
SUB-TOTAL	228.5	.0	183.5	.0	16.0	.0	.0	.0	.0	.0	87.3	.0	3	0	2	0	
731 LA-ENG LAB	Journey worker	2684.0	.0	560.5	.0	1707.0	.0	.0	.0	.0	.0	84.5	.0	23	0	19	0
	APPRENTICE																
	TRAINEE																
	(F)	284.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
SUB-TOTAL	2968.5	.0	560.5	.0	1707.0	.0	.0	.0	.0	.0	76.4	.0	25	0	19	0	
TOTAL JOURNEY WORKERS	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	4878.5	.0	1088.0	.0	2030.5	.0	.0	.0	.0	.0	63.9	.0	48	0	26	0
TOTAL APPRENTICES	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0	
TOTAL TRAINEES	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0	
(F)	766.0	.0	.0	.0	16.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0	
(M)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2.1	.0	8	0	1	0	
(O)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0	
GRAND TOTAL		5644.5	.0	1088.0	.0	2046.5	.0	.0	.0	.0	55.5	.0	56	0	27	0	

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (Include area code)

13. DATE SIGNED

PAGE 2 OF _____

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 10	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 01/10/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			01/04	01/05	01/06	01/07	01/08	01/09	01/10									
			HOURS WORKED EACH DAY															
Robert Lester	J Foreman A Ironworker H	RT	0	0	0	0	7	0	1	8	46.18	369.45	42.15	U Local 580				
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	O Vacation				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				

**INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE**

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/8 2010
DATE

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
10

TAX I.D. No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
01/10/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (INYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID				
			01/04	01/05	01/06	01/07	01/08	01/09	01/10										
Anzell Brown	J Foreman A Ironworker H	RT	HOURS WORKED EACH DAY							0	41.05	0.00	37.47	U Local 580					
			0	0	0	0	0	0	0										
Anzell Brown Jr.	J Foreman A Ironworker H	RT	0	0	0	0	0	0	1	1	82.10	82.10	74.94	U Local 580					
			0	0	0	0	0	9	7										
Erasmus Devora	J Journeyman A Ironworker H	RT	0	0	0	0	0	0	1	1	79.70	79.70	74.94	U Local 580					
			0	0	0	0	0	9	7										
Frank Cifuni	J Foreman A Ironworker H	RT	0	0	0	0	7	0	0	7	41.05	287.35	37.47	U Local 580					
			0	0	0	0	0	10	7										
Fred Markevich	J Journeyman A Ironworker H	RT	0	0	0	0	0	0	0	0	39.85	0.00	37.47	U Local 580					
			0	0	0	0	0	10	7										
James Addis	J Foreman A Ironworker H	RT	0	0	0	0	7	0	0	7	41.05	287.35	37.47	U Local 580					
			0	0	0	0	0	10	7										
Mark Testa	J Foreman A Ironworker H	RT	0	0	0	0	0	0	1	1	82.10	82.10	74.94	U Local 580					
			0	0	0	0	0	10	7										
Peter Triolo	J Foreman A Ironworker H	RT	0	0	0	0	0	0	1	1	82.10	82.10	74.94	U Local 580					
			0	0	0	0	0	10	7										

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/8, 2010
DATE

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>				AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 10	TAX I.D. No.	
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 01/10/2010		PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(9) PAID TO (Local # if Union is Checked)	(10) TOTAL BENEFITS PAID	(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY		
			M	T	W	T	F	S	S				RATE PER HOUR	TOTAL BENEFITS PAID	GROSS PAY						TOTAL TAX & OTHER DEDUCTIONS	NET PAY
			01/04	01/05	01/06	01/07	01/08	01/09	01/10													
Robert Lester	<input checked="" type="checkbox"/> Foreman Ironworker	RT	0	0	0	0	7	0	1	8	46.18	369.45	42.15	U Local 580								
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	O Vacation								
	J A H	RT												U								
		OT												E								
	J A H	RT												O								
		OT												U								
	J A H	RT												E								
		OT												O								
	J A H	RT												U								
		OT												E								
	J A H	RT												O								
		OT												U								
	J A H	RT												E								
		OT												O								

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/8 2010
DATE

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 11	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 01/17/2010		PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) (9) (10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			01/11	01/12	01/13	01/14	01/15	01/16	01/17									
Anzell Brown	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							23	44.62	1026.25	40.73	U Local 580				
			7	7	9	0	0	0	0									19
Anzell Brown Jr.	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							8	46.18	369.45	42.15	U Local 580				
			7	0	0	0	0	0	1									15
Erasmus Devora	J A H Journeyman Ironworker	RT	HOURS WORKED EACH DAY							1	79.70	79.70	74.94	U Local 580				
			0	0	0	0	0	0	1									15
Frank Cifuni	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							7	41.05	287.35	37.47	U Local 580				
			0	7	0	0	0	0	0									17
Fred Markevich	J A H Journeyman Ironworker	RT	HOURS WORKED EACH DAY							23	43.32	996.25	40.73	U Local 580				
			0	7	9	0	7	0	0									21
James Addis	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							0	41.05	0.00	37.47	U Local 580				
			0	0	0	0	0	0	0									17
Mark Testa	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							36	42.19	1518.85	38.51	U Local 580				
			7	7	7	7	7	0	1									18
Peter Triolo	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							38	44.29	1683.05	40.43	U Local 580				
			7	7	9	7	7	0	1									20

**INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE**

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/18, 2010
DATE

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
11

TAX I.D. No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
01/17/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(INYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(9) PAID TO (Local # if Union is Checked)	(10) TOTAL BENEFITS PAID	(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY		
			M	T	W	T	F	S	S				TOTAL HOURS	BASE RATE OF PAY PER HOUR	TOTAL BASE PAY						RATE PER HOUR	TOTAL BENEFITS PAID
			01/11	01/12	01/13	01/14	01/15	01/16	01/17													
Robert Lester	J A H Foreman Ironworker	RT	0	0	9	7	7	0	1	24	46.18	1108.35	42.15	U Local 580								
		OT	0	0	2	0	2	9	0	13	61.58	800.54	56.21	E O Vacation								
	J A H	RT												U								
		OT													E O							
	J A H	RT												U								
		OT													E O							
	J A H	RT												U								
		OT													E O							
	J A H	RT												U								
		OT													E O							
	J A H	RT												U								
		OT													E O							

INSTRUCTIONS ON REVERSE SIDE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/8, 2010
DATE

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		AGENCY Port Authority of New York and New Jersey		
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558	PHONE NO. 516 432 5757	PAYROLL No. 11
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 01/17/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			01/11	01/12	01/13	01/14	01/15	01/16	01/17									
Ancell Brown	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							23	44.62	1026.25	40.73	U Local 580				
			OT	7	7	9	0	0	0									0
Ancell Brown Jr.	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							8	46.18	369.45	42.15	U Local 580				
			OT	7	0	0	0	0	0									1
Erasm Devora	J A H Journeyman Ironworker	RT	HOURS WORKED EACH DAY							1	79.70	79.70	74.94	U Local 580				
			OT	0	0	0	0	0	0									1
Frank Cifuni	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							7	41.05	287.35	37.47	U Local 580				
			OT	0	7	0	0	0	0									0
Fred Markevich	J A H Journeyman Ironworker	RT	HOURS WORKED EACH DAY							23	43.32	996.25	40.73	U Local 580				
			OT	0	7	9	0	7	0									0
James Addis	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							0	41.05	0.00	37.47	U Local 580				
			OT	0	0	0	0	0	0									0
Mark Testa	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							36	42.19	1518.85	38.51	U Local 580				
			OT	7	7	7	7	7	0									1
Peter Triolo	J A H Foreman Ironworker	RT	HOURS WORKED EACH DAY							38	44.29	1683.05	40.43	U Local 580				
			OT	7	7	9	7	7	0									1

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/8 2010
DATE

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		<h2 style="margin:0;">PAYROLL REPORT</h2> <p style="margin:0;"><i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i></p>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 12	TAX ID No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 01/24/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE INVS DOL REGISTERED HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(10) TOTAL BENEFITS PAID	(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL				
			01/18	01/19	01/20	01/21	01/22	01/23	01/24										
			HOURS WORKED EACH DAY																
Anzell Brown	J A H Foreman Ironworker	RT	7	0	0	0	0	0	0	7	41.05	287.35	37.47	U Local 580					
		OT	2	0	0	0	0	0	0	2	61.58	123.16	56.21	E O Vacation					
Fred Markevich	J A H Journeyman Ironworker	RT	7	7	7	7	0	0	0	28	39.85	1115.80	37.47	U Local 580					
		OT	2	0	0	0	0	0	0	2	59.78	119.56	56.21	E O Vacation					
Mark Testa	J A H Foreman Ironworker	RT	7	0	7	0	0	0	0	14	41.05	574.70	37.47	U Local 580					
		OT	0	0	0	0	0	0	0	0	61.58	0.00	56.21	E O Vacation					
Peter Triolo	J A H Foreman Ironworker	RT	7	7	7	7	0	0	0	28	41.05	1149.40	37.47	U Local 580					
		OT	0	0	0	0	0	0	0	0	61.58	0.00	56.21	E O Vacation					
	J A H	RT												U					
		OT												E O					
	J A H	RT												U					
		OT												E O					
	J A H	RT												U					
		OT												E O					

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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SIGNATURE	Karlise Murphy NAME (Print)	President TITLE	2/8, 2010 DATE
-----------	--------------------------------	--------------------	-------------------

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 12	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 01/24/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(10) TOTAL BENEFITS PAID	(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID				
			01/18	01/19	01/20	01/21	01/22	01/23	01/24										
			HOURS WORKED EACH DAY																
Anzell Brown	J A H Foreman Ironworker	RT	7	0	0	0	0	0	0	7	41.05	287.35	37.47	<input checked="" type="checkbox"/> Local 580					
		OT	2	0	0	0	0	0	0	2	61.58	123.16	56.21	<input type="checkbox"/> Vacation					
Fred Markevich	J A H Journeyman Ironworker	RT	7	7	7	7	0	0	0	28	39.85	1115.80	37.47	<input checked="" type="checkbox"/> Local 580					
		OT	2	0	0	0	0	0	0	2	59.78	119.56	56.21	<input type="checkbox"/> Vacation					
Mark Testa	J A H Foreman Ironworker	RT	7	0	7	0	0	0	0	14	41.05	574.70	37.47	<input checked="" type="checkbox"/> Local 580					
		OT	0	0	0	0	0	0	0	0	61.58	0.00	56.21	<input type="checkbox"/> Vacation					
Peter Triolo	J A H Foreman Ironworker	RT	7	7	7	7	0	0	0	28	41.05	1149.40	37.47	<input checked="" type="checkbox"/> Local 580					
		OT	0	0	0	0	0	0	0	0	61.58	0.00	56.21	<input type="checkbox"/> Vacation					
	J A H	RT												<input type="checkbox"/> U					
	J A H	OT												<input type="checkbox"/> E					
	J A H	RT												<input type="checkbox"/> C					
	J A H	OT												<input type="checkbox"/> U					
	J A H	RT												<input type="checkbox"/> E					
	J A H	OT												<input type="checkbox"/> C					

INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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SIGNATURE

 Karlise Murphy
 NAME (Print)

 President
 TITLE

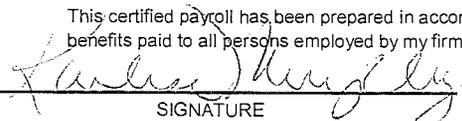
 2/8, 20 10
 DATE

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 13	TAX ID No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 01/31/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				(8) RATE PER HOUR	(9) PAID TO (Local # if Union is Checked)	(10) TOTAL BENEFITS PAID			
			01/25	01/26	01/27	01/28	01/29	01/30	01/31									
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
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	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

 SIGNATURE	Karlise Murphy NAME (Print)	President TITLE	2/8, 2010 DATE
--------------------------------------------------------------------------------------------------	--------------------------------	--------------------	-------------------

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
13

TAX I.D. No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
01/31/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) (9) (10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			01/25	01/26	01/27	01/28	01/29	01/30	01/31									
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
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	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

2/8, 2010
DATE

Monthly Employment Utilization Report

U.S. Department of Labor

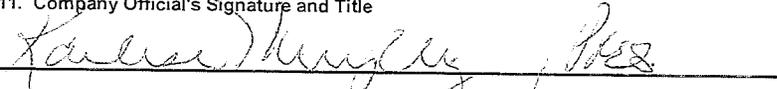
Employment Standards Administration - Office of Federal Contract Compliance Programs

This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

1. Covered Area (SMSA or EA)	2. Employers I.D. No.	CMB No. 1215-01633
------------------------------	-----------------------	--------------------

3. Current Goals Minority _____ Female _____	4. Reporting Period From 1/4/2010 To 1/31/2010	Name and Location of Contractor Beach Erectors, Inc. 54 Alabama Ave. Island Park, NY 11558	Project and Location WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing WTC - Path Station	Federal Funding Agency
----------------------------------------------------	------------------------------------------------------	-----------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------	------------------------

5. CONSTRUCTION TRADE	Classifications	6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS										7. Minority Percentage	8. Female Percentage	9. Total Number of Employees		10. Total Number of Minority Employees		
		6a. Total All Employees By Trade		6b. Black (Not of Hispanic Origin)		6c. Hispanic		6d. Asian or Pacific Islander		6e. American Indian or Native American				M	F	M	F	
		M	F	M	F	M	F	M	F	M	F							
Ironworker	Journey Worker	572	0	107	0	33	0	0	0	0	0	24.48%	0.00%	9	0	3	0	
	Apprentice	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Trainee	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Sub-Total	572		107		33		0		0				9		3		
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Total Journey Worker	572	0	107	0	33	0	0	0	0	0	24.48%	0.00%	9	0	3	0	
	Total Apprentice	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Total Trainee	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Grand Total	572		107		33		0		0		9		3				

11. Company Official's Signature and Title 	12. Telephone Number (Include area code) 516-432-5757	13. Date Signed 2/8/10	Page 1 of 1
-----------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------	---------------------------	----------------

FRANCOIS BACHAALANY
Commissioner of Deeds
City of New York, No. 2-10704
Qualified in Kings County
Commission Expires Jan. 1, 2011

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		Jan. 2, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS
				Hours Worked																
Avraam Papazoglou		8601	S								52.47									
			O	No																
Frank Van Brunt		8601	S								41.11									
			O	Work																
			S																	
			O																	
			S																	
			O																	
			S																	
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			S																	
			O																	

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		Jan. 9, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST OR OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS
				Hours Worked																
Avraam Panazoglou		8601	S					2			2	52.47	104.94							
Frank Van Brunt		8601	S					2			2	41.11	82.22							
			S																	
			S																	
			S																	
			S																	
			S																	
			S																	
			S																	
			S																	

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																				
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																				
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.												
		Jan. 16, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15												
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST of OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK					
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	--	OTHER		TOTAL DEDUCTIONS				
				Hours Worked																				
Avraam Papazoglou		8601	\$																					
Frank Van Brunt		8601	\$																					
			\$																					
			\$																					
			\$																					
			\$																					
			\$																					
			\$																					
			\$																					

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		Jan. 23, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS
				Hours Worked																
Avraam Papazoglou		8601	S	3	2						5	52.47	262.35							
Frank Van Brunt		8601	S	3	2						5	41.11	205.55							
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																	
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																	
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.									
		Jan-30, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15									
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK		
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	--	OTHER		TOTAL DEDUCTIONS	
				25	26	27	28	29	30												
				Hours Worked																	
Avraam Papazoglou		8601	S			X	1						52.47								
Frank Van Brunt		8601	S										41.11								
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		

25

MONTHLY EMPLOYMENT UTILIZATION REPORT

USER INSTRUCTIONS:

1. Please read reverse side of this form for detailed instructions
2. Complete all applicable information, leave shaded boxes blank.
3. If more than 1 page is used, complete all information for "TOTAL THIS MONTH" and "GRAND TOTAL TO DATE" on last page only.
4. ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

This form submitted w/ payment application #	LIST SUBCONTRACTORS INCLUDED IN THIS REPORT (IF ANY)	FOR R.E. OFFICE USE ONLY REVIEWED BY: DATE RECEIVED: 1/1/10	PAGE of
	1 Fehring Surveying	Reporting Period	Actual Start Date
	2	From: 1/1/10	Contract Goals
	3	To: 1/31/10	MINORITY
	4	% of	Skilled 30 %
	5	Completion	Laborer 40 %
	6		FEMALE
7		Skilled/Laborer 6.9 %	Projected Completion Date

Project Title:
WTC Path Foundations
Contract # or TAA #:
WTC 614.001 W015
Location:
WTC - NYC

Prime Contractor's Name:
T. Moriarty & Son, Inc.
Address:
63 Creamer St.
Brooklyn, NY 11231
Phone:
Prepared By: _____ Date _____

WORK HOURS OF EMPLOYEES

#1 Construction Trade	#2 Classification	#3 Total All Employee Hours		#4 Sum of All Employee Hours (Add 3M + 3F)	#5 Black		#6 Hispanic		#7 Asian		#8 Native American		#9 Total Minority Hours (Add 5 thru 8)	#10 % Minority Hours (#9 DIV #4)	#11 % Female Hours (#3F DIV #4)	#12 Total Number of Employees		#13 Total Number of Minority Employees		
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Surveying	JOURNEY WORKER	14	0	14									0				2			
	APPRENTICE																			
	SUBTOTAL	14	0	14									0							
	JOURNEY WORKER																			
	APPRENTICE																			
	SUBTOTAL																			
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	14	0	14																
	TOTAL APPRENTICE																			
	TOTAL SKILLED TRADES																			
	LABORERS																			
GRAND TOTAL FROM LAST MONTH	SKILLED TRADES	298		298																
	LABORERS																			

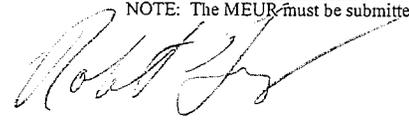
GRAND TOTAL TO DATE	SKILLED TRADES	312		312																
	LABORERS																			

For R.E. Office Use Only
Reviewed By: _____
Date: _____
Are Goals Being Met? Circle One
Minority Female
Yes No Yes No

COMPANY OFFICIAL'S SIGNATURE AND TITLE: Robert Fehring, President DATE SIGNED: 2/3/10

*Superintendents' hours should not be included in this form.

NOTE: The MEUR must be submitted within 5 business days of month end.



Date 2/2/10

I, Robert Fehring President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Fehring Surveying, P.C. on the
(Contractor or Subcontractor)

WTC - Path Foundations; that during the payroll period commencing on the
(Building or Work)

1st day of January, 2010, and ending the 31st day of January, 2010,
all persons employed on said project have been paid the full weekly wages earned, that no rebates have
been or will be made either directly or indirectly to or on behalf of said

Fehring Surveying, P.C. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly
from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part
3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948,
63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below.

None

(2) That any payrolls otherwise under this contract required to be submitted for the above period are
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the
applicable wage rates contained in any wage determination incorporated into the contract; that the
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide
apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of
Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a
State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in
the above referenced payroll, payments of fringe benefits as listed in the contract
have been or will be made to appropriate programs for the benefit of such
employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid,
as indicated on the payroll, an amount not less than the sum of the applicable
basic hourly wage rate plus the amount of the required fringe benefits as listed
in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:


BERNICE A. FEHRINGER
Notary Public, State of New York
No. 01FE602 7706
Qualified in Nassau County
Commission Expires July 12, 2011

NAME AND TITLE <u>Robert Fehring, President</u>	SIGNATURE 
----------------------------------------------------	----------------------------------------------------------------------------------------------------

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
31 OF THE UNITED STATES CODE.

NAME OF CONTRACTOR / SUB-CONTRACTOR
McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS
11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No. **1** **PAGE 1 OF 2**

WEEK ENDING
JANUARY 6, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)			
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS				
			HOURS WORKED EACH DAY																				
GREGG TAIT	✓	J OP. ENG.	S	/	/	/	16*	8	/	/	24	38.92	3,107.44	UNION	✓	14							
			A												EMPLOYEE								
			T	0	8	8	8	/	/	/	24	64.61											
			J	0	/	/	/	/	/	8	8	77.84				UNION							
			A	0	*INCLUDES 8 HRS OWED W/E 12/31/09											EMPLOYEE							
PATRICK McGRATH	✓	J TIMBERMAN	S	8	8	8	8	/	/	/	32	47.88	1,532.16	UNION	✓	1536							
			A												EMPLOYEE								
			T	0																			
			J	0												UNION							
			A	0												EMPLOYEE							
DAVID DELPRIORE	✓	J BLASTER	S	8	8	8	8	/	/	/	32	41.28	1,816.32	UNION	✓	29							
			A												EMPLOYEE								
			T	0	/	/	/	/	8	/	8	61.92											
			J	0												UNION							
			A	0												EMPLOYEE							
REYNALDO MARTINEZ	✓	J LABORER	S	/	8	8	8	/	/	/	24	36.64	879.36	UNION	✓	731							
			A												EMPLOYEE								
			T	0																			
			J	0												UNION							
			A	0												EMPLOYEE							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE *Patti M. Smith* **PATTI M. SMITH, PRESIDENT**

1/15/10

Sworn to before me this 15TH day of JANUARY 2010

Kathleen Manning
 Notary Public

KATHLEEN S. MANNING
 Notary Public, State of New York
 No. 01466000751
 Qualified in Putnam County
 Commission Expires October 25, 2013

PAY ROLL REPORT

[TO BE SUBMITTED WITH REQUISITION FOR PAYMENT]

NAME OF CONTRACTOR / SUB-CONTRACTOR McCORMACK SMITH CONTRACTING CO., INC.	ADDRESS 11 BLACK DIAMOND HILL, GARRISON, NY 10524
PAYROLL No. 1 PAGE 2 OF 2	WEEK ENDING JANUARY 6, 2010
PROJECT - LOCATION WORLD TRADE CENTER GENERAL SITE WIC614.001 WO 15	
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS	

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)
		M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS	
		HOURS WORKED EACH DAY																	
ALRIANDRO VALDOVINOS	LABORER	S	/	/	/	8	/	/	/	8	36.64	732.80	UNION ✓ 731						
	A	O	/	/	/	/	/	8	/	8	54.96		EMPLOYEE						
	T	S										UNION							
	J	A	O									EMPLOYEE							
	T	O																	
SAMUEL MARTINEZ	LABORER	S	8	8	8	8	/	/	/	32	36.64	1,667.12	UNION ✓ 731						
	A	O	/	/	1	/	/	8	/	9	54.96		EMPLOYEE						
	T	S										UNION							
	J	A	O									EMPLOYEE							
	T	O																	
JOHN A MAROZ II	LABORER	S	8	8	8	/	/	/	/	24	36.64	1,319.04	UNION ✓ 731						
	A	O	/	/	/	/	/	8	/	8	54.96		EMPLOYEE						
	T	S										UNION							
	J	A	O									EMPLOYEE							
	T	O																	
JOSEPH S SAPIO	LABORER	S	/	8	8	8	/	/	/	24	36.64	879.36	UNION ✓ 731						
	A	O											EMPLOYEE						
	T	S										UNION							
	J	A	O									EMPLOYEE							
	T	O																	

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

[Signature]
SIGNATURE

PATTI M. SMITH, PRESIDENT

1/15/10

Sworn to before me this 15TH day of JANUARY 2010

Kathleen D. Manning
Notary Public

KATHLEEN S. MANNING
Notary Public, State of New York
No. 0344560354
Qualified in Putnam County
Commission Expires October 26, 2013

PAY ROLL REPORT

[TO BE SUBMITTED WITH REQUISITION FOR PAYMENT]

THE PORT AUTHORITY OF
NEW YORK & NEW JERSEY

THE CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
DIVISION OF LABOR LAW

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.
1

PAGE 1 OF 2

WEEK ENDING

JANUARY 13, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WIC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) LIST CRAFT & CLASSIF. IF US CITIZ	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)	
		M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS
		11	12	13	14	15	16	17					HOURS WORKED EACH DAY						
ALEJANDRO VALDOVINOS	J	S	8	8	8	8	8	/	/	40	36.64	UNION ✓ 731 EMPLOYEE							
	A	O	/	/	/	/	/	8	/	8	54.96		1905.28						
	J	S										UNION							
	A	O										EMPLOYEE							
	J	S										UNION							
SAMUEL MARTINEZ	J	S	8	8	8	8	8	/	/	40	36.64	UNION ✓ 731 EMPLOYEE							
	A	O	/	/	/	/	/	/	0		1465.60								
	J	S										UNION							
	A	O										EMPLOYEE							
	J	S										UNION							
JOHN A NAROG II	J	S	8	3	8	8	8	/	/	35	36.64	UNION ✓ 731 EMPLOYEE							
	A	O	/	/	/	/	/	/	0		1282.40								
	J	S										UNION							
	A	O										EMPLOYEE							
	J	S										UNION							
JOSE CISNEROS	J	S	/	8	8	/	/	/	/	16	36.64	UNION ✓ 731 EMPLOYEE							
	A	O	/	/	/	/	/	/	0		586.24								
	J	S										UNION							
	A	O										EMPLOYEE							
	J	S										UNION							
JOSEPH S. SAPIO	J	S	8	8	8	8	8	/	/	40	36.64	UNION ✓ 731 EMPLOYEE							
	A	O	/	/	/	/	/	/	0		1465.60								
	J	S										UNION							
	A	O										EMPLOYEE							
	J	S										UNION							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

PATTI M. SMITH, PRESIDENT

1/15/10

Sworn to before me this **15TH** day of **JANUARY 2010**

Kathleen S. MacGinn
Notary Public

KATHLEEN S. MACGINN
Notary Public, State of New York
No. 0154500101
Qualified in Fulton County, 2013
Commission Expires October 23, 2013

PAI ROLL REPORT

[TO BE SUBMITTED WITH REQUISITION FOR PAYMENT]

THE PORT AUTHORITY OF
NEW YORK & NEW JERSEY

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1 PAGE 2 OF 2

WEEK ENDING

JANUARY 13, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZ	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)		
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS			
			HOURS WORKED EACH DAY																			
GREGG TAIT	J	A	/	/	/	/	/	/	/	0			UNION ✓ 14									
			T	0	5	8	8	8	8	8	/	/	40	64.61	2584.40	EMPLOYEE						
			J													UNION EMPLOYEE						
PATRICK McGRATH	J	A	8	8	8	8	8	/	/	40	47.88		UNION ✓ 1536									
			T	0	/	/	/	/	/	/	0		1915.20	EMPLOYEE								
			J													UNION EMPLOYEE						
DAVID DELPRIORE	J	A	8	8	8	8	8	/	/	40	41.28		UNION ✓ 29									
			T	0	/	/	/	/	8	/	8	61.92	2146.56	EMPLOYEE								
			J													UNION EMPLOYEE						
REYNALDO MARTINEZ	J	A	8	8	8	8	8	/	/	40	36.64		UNION ✓ 731									
			T	0	/	/	/	/	/	/	0		1465.60	EMPLOYEE								
			J													UNION EMPLOYEE						

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

[Signature]
PRESIDENT

PATRI M. SMITH, PRESIDENT

1/15/10

Sworn to before me this 15TH day of JANUARY 2010

[Signature]
Notary Public

MARLEEN S. MACFARLANE
Notary Public, State of New York
No. 0114262554
Qualified in Putnam County
Commission Expires 06/04/2013

PAY ROLL REPORT

[TO BE SUBMITTED WITH REQUISITION FOR PAYMENT]

NAME OF CONTRACTOR / SUB-CONTRACTOR

ADDRESS

McCORMACK SMITH CONTRACTING CO., INC.

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

WEEK ENDING

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WPC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

1 PAGE 1 OF 2

JANUARY 20, 2010

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)				
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS			
			HOURS WORKED EACH DAY																				
ALEJANDRO VALDOVINOS	J	LABORER	S	/	/	/	8	8	8	/	24	36.64	879.36	UNION									
			A	/	/	/	/	/	/	/	0												
			T	/	/	/	/	/	/	/	/	0											
			J	/	/	/	/	/	/	/	/	0											
SAMUEL MARTINEZ	J	LABORER	S	8	8	8	8	8	/	40	36.64	1960.24	UNION										
			A	/	/	/	/	1	8	/	9	54.96											
			T	/	/	/	/	/	/	/	/	0											
			J	/	/	/	/	/	/	/	/	0											
JOHN A NAROG II	J	LABORER	S	8	8	8	8	8	/	40	36.64	1905.28	UNION										
			A	/	/	/	/	1	8	/	8	54.96											
			T	/	/	/	/	/	/	/	/	0											
			J	/	/	/	/	/	/	/	/	0											
JOSE CISNEROS	J	LABORER	S	/	/	/	8	8	/	16	36.64	586.24	UNION										
			A	/	/	/	/	/	/	/	0												
			T	/	/	/	/	/	/	/	/	0											
			J	/	/	/	/	/	/	/	/	0											
JOSEPH S. SAPIO	J	LABORER	S	8	/	/	8	8	/	24	36.64	1044.24	UNION										
			A	/	/	/	/	3	/	3	54.96												
			T	/	/	/	/	/	/	/	/	0											
			J	/	/	/	/	/	/	/	/	0											

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith

PATTI M. SMITH, PRESIDENT

1/21/10

Sworn to before me this 21st day of JANUARY 2010

Kathleen S. MacPhee
Notary Public

KATHLEEN S. MACPHEE
Notary Public, State of New York
No. 01MA505054
Qualified in Putnam County
Commission Expires October 22, 2013

NAME OF CONTRACTOR / SUB-CONTRACTOR

ADDRESS

McCORMACK SMITH CONTRACTING CO., INC.

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

WEEK ENDING

PROJECT - LOCATION WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15

1 PAGE 2 OF 2

JANUARY 20, 2010

CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)	
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS
			HOURS WORKED EACH DAY																	
GREGG TAIT	J	S	/	/	/	/	/	/	0				UNION							
			A	0	5	/	/	8	8	8	24	64.61	2173.36	EMPLOYEE						
PATRICK McGRATH	J	S	/	/	/	/	/	8	8	32	47.88		UNION							
			A	0	/	/	/	1	/	1	68.13	1600.29	EMPLOYEE							
DAVID DELPRIORE	J	S	/	/	/	/	/	8	8	40	41.28		UNION							
			A	0	/	/	/	8	/	8	61.92	2146.56	EMPLOYEE							
REYNAL DO MARTINEZ	J	S	/	/	/	8	8	/	16	36.64		UNION								
			A	0	/	/	/	/	/	0		586.24	EMPLOYEE							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

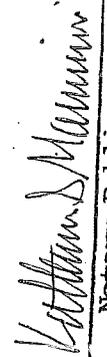
I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE 

PATTI M. SMITH, PRESIDENT

1/21/10

Sworn to before me this 21st day of JANUARY 2010


Notary Public

CATERINA S. MICHINI
Notary Public, State of New York
No. 07848550864
Qualified in Putnam County
Commission Expires October 13, 2013

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.
1

WEEK ENDING
JANUARY 27, 2010

PROJECT - LOCATION WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)				
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS			
			HOURS WORKED EACH DAY																				
SAMUEL MARTINEZ	J	LABORER	S	8	8	8	8	8	/	/	40	36.64	1,603. ⁰⁰	UNION	✓	731							
			A	/	/	/	1/2	2	/	/	2 1/2	54.96		EMPLOYEE									
			T												UNION								
			A												EMPLOYEE								
			T																				
PATRICK McGRATH	J	TIMBERMAN	S	8	8	8	8	8	/	/	40	47.88	2,051. ⁴⁶	UNION	✓	1538							
			A	/	/	/	1	1	/	/	2	68.13		EMPLOYEE									
			T												UNION								
			A												EMPLOYEE								
			T																				
JOHN A NAROG II	J	LABORER	S	8	8	8	8	/	/	32	36.64	1,254. ⁹²	UNION	✓	731								
			A	/	/	/	1 1/2	/	/	1 1/2	54.96		EMPLOYEE										
			T												UNION								
			A												EMPLOYEE								
			T																				
DAVID DELPRIORE	J	BLASTER	S	8	8	8	8	8	/	/	40	41.28	2,022. ⁷²	UNION	✓	29							
			A	/	/	/	1 1/2	3	/	/	4 1/2	82.56		EMPLOYEE									
			T												UNION								
			A												EMPLOYEE								
			T																				

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE

Patti M. Smith

PATTI M. SMITH, PRESIDENT

1-29-10

Sworn to before me this 29 day of January, 2010

TINA M. MERANDO
NOTARY PUBLIC, STATE OF NEW YORK
REG 01ME5079624
QUALIFIED IN PUTNAM COUNTY
COM EXP. RES. JUNE 9, 2011

Tina M. Merando
Notary Public

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 23	JOB NO. 91415	WEEK ENDING 02/03/10	PROJECT AND LOCATIONS EARLY WKS FOUND			PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS		NET PAY					
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX	OT	REG	OTHER	GOVERNMENT	OTHER						
51909	JOHN, MICHAEL	V	29	LA-LA DRI	M	0	T	80	S	0	REG										
					W	0	F	0	SUN	0	OT										
					WED	0	0	80	0	TOTAL											
			32080	20															28840		
58938	MANCUSO, JAMES N	Y	29	LA-LA DRI	M	80	T	0	S	0	REG										
					W	80	F	0	SUN	0	OT										
					WED	80	0	320	0	TOTAL											
			34740	20															28841		
60863	MENDEZ, DANIEL A	Y	29	LA-LA DRI	M	80	T	80	S	0	REG										
					W	80	F	80	SUN	0	OT										
					WED	80	0	400	0	TOTAL											
			32080	20															28842		
64493	NIEDOSPIAL, JOHN J	V	29	LA-LA DRI	M	80	T	80	S	0	REG										
					W	80	F	80	SUN	0	OT										
					WED	80	0	400	0	TOTAL											
			32080	20															28843		
71687	PAVON, CERSO J	Y	29	LA-LA DRI	M	80	T	80	S	10	REG										
					W	80	F	80	SUN	0	OT										
					WED	0	0	320	10	TOTAL											
			32080	20															28844		
19019	BOHM, GARY F	V	46	LT-LATHER	M	0	T	0	S	70	REG										
					W	0	F	0	SUN	10	OT										
					WED	0	0	70	10	TOTAL											
			42000	15															28845		

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
L - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 29	JOB NO. 91415	WEEK ENDING 02/03/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS				DEDUCTIONS				NET PAY							
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	OTHER	VAC	TAX	GOVERNMENT	OTHER	TOTAL DEDUCTIONS									
25454	REID, DANIEL	V	46	LT-LATHER	M	0	T	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	\$
					W	0	F	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
					TH	0	FR	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
				WE	0	SA	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				DE	0	SU	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				AD	0	UN	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				J	0	TOTAL	0	ADJ	0													28846		
				F	42000	15	0	0	70	10														
26004	DEFREN, JOSEPH R	V	79	LA-MAS TE	M	80	T	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	\$
					W	0	F	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
					TH	0	FR	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
				WE	0	SA	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				DE	0	SU	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				AD	0	UN	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				J	32240	15	80	0	310	0													28755	
				F																				
38841	GRACI, CHARLES	V	79	LA-MAS TE	M	0	T	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	\$
					W	0	F	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
					TH	0	FR	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
				WE	0	SA	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				DE	0	SU	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				AD	0	UN	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				J	36090	15	0	0	80	5													28756	
				F																				
36465	FULLER, VINCENT M	V	100	CA-CARPEN	M	80	T	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	\$
					W	0	F	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
					TH	0	FR	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
				WE	0	SA	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				DE	0	SU	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				AD	0	UN	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				J	44610	15	80	0	390	0													28749	
				F																				
58179	LUNEBURG, RICHARD	V	100	CA-CARPEN	M	0	T	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	\$
					W	0	F	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
					TH	0	FR	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
				WE	0	SA	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				DE	0	SU	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				AD	0	UN	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				J	47610	15	0	0	80	0													28752	
				F																				
17226	BARAJAS, JORGE A	V	731	LA-ENG LA	M	80	T	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	\$
					W	0	F	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
					TH	0	FR	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS	
				WE	0	SA	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				DE	0	SU	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				AD	0	UN	0	S	0	REG	0	OTHER	0	VAC	0	TAX	0	GOVERNMENT	0	OTHER	0	TOTAL DEDUCTIONS		
				J	36640	15	80	0	400	15													28759	
				F																				

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
JOURNEYMAN
APPRENTICE
TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 24	JOB NO. 91415	WEEK ENDING 02/10/10	EARLY WKS FOUND	PROJECT AND LOCATIONS	PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS				DEDUCTIONS				NET PAY			
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX	OT	REG	GOVERNMENT	OTHER	TOTAL DEDUCTIONS					
58938	MANCUSO, JAMES N	Y	34740 20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	\$	
				29	LA-LA	DRI	0	0	0	0	0	0	0	0	0	0	0	0	0	CHECK NO.
				F	TOTAL	80	0	80	0	0	0	0	0	0	0	0	0	0	0	28938 P
58938	MANCUSO, JAMES N	Y	34740 20	80	0	80	0	0	0	0	0	0	0	0	0	0	0	\$		
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	CHECK NO.
				F	TOTAL	80	0	320	0	0	0	0	0	0	0	0	0	0	0	28938
60863	MENDEZ, DANIEL A	Y	32080 20	80	0	80	0	0	0	0	0	0	0	0	0	0	0	\$		
				29	LA-LA	DRI	70	0	80	0	0	0	0	0	0	0	0	0	0	CHECK NO.
				JS	TOTAL	0	0	310	0	0	0	0	0	0	0	0	0	0	0	28939
64493	NIEDOSPIAL, JOHN J	Y	32080 20	80	0	80	0	0	0	0	0	0	0	0	0	0	0	\$		
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	CHECK NO.
				J	TOTAL	0	0	320	0	0	0	0	0	0	0	0	0	0	0	28940
71687	PAVON, CORSO J	V	32080 20	80	0	80	0	0	0	0	0	0	0	0	0	0	0	\$		
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	CHECK NO.
				J	TOTAL	0	0	320	0	0	0	0	0	0	0	0	0	0	0	28941
26004	DEFREN, JOSEPH R	V	32240 15	80	0	80	0	0	0	0	0	0	0	0	0	0	0	\$		
				79	LA-MAS	TE	80	0	80	0	0	0	0	0	0	0	0	0	0	CHECK NO.
				J	TOTAL	0	0	320	0	0	0	0	0	0	0	0	0	0	0	28855

CODE 1 OPP. ENG. CODE CLASSIFICATIONS	CODE 2 4 - JOURNEYMAN 3 - APPRENTICE 2 - TRAINEE	ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
		STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 24	JOB NO. 91415	WEEK ENDING 02/10/10	PROJECT AND LOCATIONS EARLY WKS FOUND	PROJECT OR CONTRACT NO. 61400115		

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS				DEDUCTIONS		NET PAY			
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	OTHER	GOVERNMENT	OTHER							
36465	FULLER, VINCENT M	Y	100 CA-CARPEN	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL				166368				28850							
17226	BARAJAS, JORGE A	V	731 LA-ENG LA	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				TOTAL				117248				28859							
21505	CARDENAS, JUAN C	V	731 LA-ENG LA	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				TOTAL				117248				28861							
26983	DONNELLY, JOHN	Y	731 LA-ENG LA	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				TOTAL				114048				28864							
29029	EDWARDS, LINUS	V	731 LA-ENG LA	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				TOTAL				117248				28865							
35464	FITZGERALD, JOE A	V	731 LA-ENG LA	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				TOTAL				161216				28867							

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 25	JOB NO. 91415	WEEK ENDING 02/17/10	PROJECT AND LOCATIONS EARLY WKS FOUND			PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS		NET PAY																			
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	OTHER	VAC	TAX	FED	SOC SEC	SUI																				
61941	MONTES, BALTAZAR F	Y	10	LA-LABORE	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	OTHER	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.
					80	0	80	0	80	0	TOTAL	ADJ	0	TOTAL EARNINGS	160644	TOTAL DEDUCTIONS	28987																		
					J	36510	15	80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19778	BROTHERS, SEAN R	Y	14	OE-OP ENG	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	OTHER	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.
					80	0	80	0	TOTAL	ADJ	0	TOTAL EARNINGS	124544	TOTAL DEDUCTIONS	28990																				
					J	33070	20	0	0	0	160	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19778	BROTHERS, SEAN R	V	14	OE-OP ENG	MON	80	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	OTHER	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.
					0	0	0	0	TOTAL	ADJ	0	TOTAL EARNINGS	31136	TOTAL DEDUCTIONS	28990 H																				
					J	33070	20	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19778	BROTHERS, SEAN R	V	14	OE-OP ENG	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	OTHER	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.
					80	0	80	0	TOTAL	ADJ	0	TOTAL EARNINGS	93408	TOTAL DEDUCTIONS	28990																				
					J	33070	20	0	0	240	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50996	JAMES, FRANK A	V	15	OE-OP ENG	MON	80	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	OTHER	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.
					0	0	0	0	TOTAL	ADJ	0	TOTAL EARNINGS	42920	TOTAL DEDUCTIONS	28993 H																				
					JB	49660	20	0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50996	JAMES, FRANK A	V	15	OE-OP ENG	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	OTHER	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.
					80	0	130	0	TOTAL	ADJ	0	TOTAL EARNINGS	37550	TOTAL DEDUCTIONS	28993																				
					JB	49660	20	0	0	120	0	290	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

CODE 1
OPP. ENG. CODE CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE
B - BOU
I -
I -
I -
I -
I -
I -

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 25	JOB NO. 91415	WEEK ENDING 02/17/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS	DEDUCTIONS				NET PAY		
				STT	O.T.	STT	O.T.	O.T.		GOVERNMENT	OTHER					
60863	MENDEZ, DANIEL A	Y	29	LA-LA DRI	MON	0	THU	80	SAT	0	TAXABLE EARNING					
					TUE	0	FRI	80	SUN	0						
					WED	0	TOTAL	320	80							
											TOTAL EARNINGS	198	TOTAL DEDUCTIONS		CHECK NO.	29037
64493	NIEDOSPIAL, JOHN J	V	29	LA-LA DRI	MON	0	THU	80	SAT	0	TAXABLE EARNING					
					TUE	0	FRI	80	SUN	0						
					WED	0	TOTAL	320	80							
											TOTAL EARNINGS	198	TOTAL DEDUCTIONS		CHECK NO.	29038
71687	PAVON, CERSO J	Y	29	LA-LA DRI	MON	0	THU	80	SAT	0	TAXABLE EARNING					
					TUE	0	FRI	80	SUN	0						
					WED	0	TOTAL	320	80							
											TOTAL EARNINGS	330	TOTAL DEDUCTIONS		CHECK NO.	HAND- CO. 622
23716	CONTEGIACOMO, RAYMO	V	60	LA-WC LAB	MON	0	THU	80	SAT	0	TAXABLE EARNING					
					TUE	0	FRI	80	SUN	0						
					WED	0	TOTAL	320	145							
											TOTAL EARNINGS	1090	TOTAL DEDUCTIONS		CHECK NO.	29046
26004	DEFREN, JOSEPH R	V	79	LA-MAS TE	MON	0	THU	80	SAT	0	TAXABLE EARNING					
					TUE	0	FRI	80	SUN	0						
					WED	0	TOTAL	320	0							
											TOTAL EARNINGS	1055	TOTAL DEDUCTIONS		CHECK NO.	28956
36465	FULLER, VINCENT M	V	100	CA-CARPEN	MON	0	THU	80	SAT	0	TAXABLE EARNING					
					TUE	0	FRI	80	SUN	90						
					WED	0	TOTAL	320	90							
											TOTAL EARNINGS	2332	TOTAL DEDUCTIONS		CHECK NO.	28951

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP			CITY	UNION	TOT DED	NET EARN	EXP	

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 25	JOB NO. 91415	WEEK ENDING 02/17/10	PROJECT AND LOCATIONS EARLY WKS FOUND			PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED			EARNINGS				DEDUCTIONS				NET PAY							
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX	OT	HER	GOVERNMENT	VAC		OTHER	CHECK NO.					
58179	LUNEBURG, RICHARD	100	CA-CARPEN	M		T		S		R		V		F		T						
				W		TH		SA		REG		OC		FW		VA		FI		OT		
				U		U		SU		OT		OT		TC		AC		CA		OT		
			47610	1.5																		
																					28954	
17226	BARAJAS, JORGE A	731	LA-ENG LA	M		T		S		R		V		F		T						
				W		TH		SA		REG		OC		FW		VA		FI		OT		
				U		U		SU		OT		OT		TC		AC		CA		OT		
			36640	1.5																	28960	
																					28960	
21505	CARDENAS, JUAN C	731	LA-ENG LA	M		T		S		R		V		F		T						
				W		TH		SA		REG		OC		FW		VA		FI		OT		
				U		U		SU		OT		OT		TC		AC		CA		OT		
			36640	1.5																	29312	
																					29312	
26983	DONNELLY, JOHN	731	LA-ENG LA	M		T		S		R		V		F		T						
				W		TH		SA		REG		OC		FW		VA		FI		OT		
				U		U		SU		OT		OT		TC		AC		CA		OT		
			35640	1.5																	156816	
																					156816	
29029	EDWARDS, LINUS	731	LA-ENG LA	M		T		S		R		V		F		T						
				W		TH		SA		REG		OC		FW		VA		FI		OT		
				U		U		SU		OT		OT		TC		AC		CA		OT		
			36640	1.5																	117248	
																					117248	
32846	EUYOQUE, EDUARDO	731	LA-ENG LA	M		T		S		R		V		F		T						
				W		TH		SA		REG		OC		FW		VA		FI		OT		
				U		U		SU		OT		OT		TC		AC		CA		OT		
			36640	1.5																	54960	
																					54960	

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
JOURNEYMAN
APPRENTICE
TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 26	JOB NO. 91415	WEEK ENDING 02/24/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS				DEDUCTIONS				NET PAY					
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	EX	OT	VAC	TAX	FED	SOC SEC	SUI						
29062	EDWARDS, DENNIS I	Y		M	T	W	T	S	R	VI												
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	
				J	32080	20	80	0	400	0	0	0	0	0	0	0	0	0	0	0	0	29134
51909	JOHN, MICHAEL	Y		M	T	W	T	S	R	VI												
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	
				J	32080	20	80	0	400	0	0	0	0	0	0	0	0	0	0	0	0	29135
58938	MANCUSO, JAMES N	IV		M	T	W	T	S	R	VI												
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	
				F	34740	20	80	0	400	0	0	0	0	0	0	0	0	0	0	0	0	29136
60863	MELENDEZ, DANIEL A	IV		M	T	W	T	S	R	VI												
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	
				J	32080	20	80	0	400	0	0	0	0	0	0	0	0	0	0	0	0	29137
64493	NIEDOSPIAL, JOHN J	IV		M	T	W	T	S	R	VI												
				29	LA-LA	DRI	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	
				J	32080	20	80	0	400	0	0	0	0	0	0	0	0	0	0	0	0	29138
23716	CONTEGIACOMO, RAYMO Y	Y		M	T	W	T	S	R	VI												
				60	LA-WC	LAB	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
				J	36640	15	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	29144

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE
B -
O -
U -
R -

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

**MONTHLY EMPLOYMENT
UTILIZATION REPORT**

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD

MINORITY: _____

FROM: 01/28/10

FEMALE: _____

TO: 02/24/10

This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

2 EMPLOYERS I.D. NO.

91415 EARLY WKS FOUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL
FUNDING
AGENCY

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES	
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE				M	F	M	F
		M	F	M	F	M	F	M	F	M	F						
10 LA-LABORER	Journey worker	191.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	191.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
14 OE-OP ENGI	Journey worker	197.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	APPRENTICE													4	0	0	0
	TRAINEE																
	SUB-TOTAL	197.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	4	0	0	0
15 OE-OP ENGI	Journey worker	174.0	.0	83.5	.0	80.0	.0	.0	.0	.0	.0	.0	.0	4	0	0	0
	APPRENTICE											94.0	.0	3	0	2	0
	TRAINEE																
	SUB-TOTAL	174.0	.0	83.5	.0	80.0	.0	.0	.0	.0	.0	94.0	.0	3	0	2	0
29 LA-LA DRIL	Journey worker	738.5	.0	217.0	.0	151.0	.0	.0	.0	.0	.0	.0	.0	7	0	3	0
	APPRENTICE											49.8	.0				
	TRAINEE (F)	136.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	SUB-TOTAL	874.5	.0	217.0	.0	151.0	.0	.0	.0	.0	.0	42.1	.0	8	0	3	0
46 LT-LATHERS	Journey worker																
	APPRENTICE																
	TRAINEE (F)	16.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	SUB-TOTAL	16.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
TOTAL JOURNEY WORKERS														2	0	0	0
TOTAL APPRENTICES																	
TOTAL TRAINEES																	
GRAND TOTAL																	

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (include area code)

13. DATE SIGNED

PAGE

1 OF

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

MONTHLY EMPLOYMENT UTILIZATION REPORT

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD

MINORITY: _____

FROM: 01/28/10

FEMALE: _____

TO: 02/24/10

This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

2. EMPLOYER ID. NO.

91415 EARLY WKS FOUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL FUNDING AGENCY

6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)

CONSTRUCTION TRADE	Classifications	6a. TOTAL ALL EMPLOYEES BY TRADE												7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES	
		M		F		HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		M	F			M	F		
		M	F	M	F	M	F	M	F	M	F	M	F			M	F		
60 LA-WC LABO	Journey worker	30.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
	APPRENTICE																		
	TRAINEE																		
	SUB-TOTAL	30.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
79 LA-MAS TEN	Journey worker	135.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
	APPRENTICE																		
	TRAINEE (F)	8.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
	SUB-TOTAL	143.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
100 CA-CARPENT	Journey worker	144.0	.0	144.0	.0	.0	.0	.0	.0	.0	.0	.0	100.0	.0					
	APPRENTICE																		
	TRAINEE (F)	22.0	.0	.0	.0	8.0	.0	.0	.0	.0	.0	.0	36.4	.0					
	SUB-TOTAL	166.0	.0	144.0	.0	8.0	.0	.0	.0	.0	.0	.0	.0	.0					
731 LA-ENG LAB	Journey worker	1681.5	.0	323.5	.0	1064.0	.0	.0	.0	.0	.0	.0	91.6	.0					
	APPRENTICE												82.5	.0					
	TRAINEE (F)	170.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
	SUB-TOTAL	1851.5	.0	323.5	.0	1064.0	.0	.0	.0	.0	.0	.0	74.9	.0					
TOTAL JOURNEY WORKERS	Journey worker	3291.5	.0	768.0	.0	1295.0	.0	.0	.0	.0	.0	.0							
	APPRENTICES	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	62.7	.0					
	TRAINEES (F)	352.5	.0	.0	.0	8.0	.0	.0	.0	.0	.0	.0	.0	.0					
	(O)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2.3	.0					
GRAND TOTAL	(P)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0					
	SUB-TOTAL	3644.0	.0	768.0	.0	1303.0	.0	.0	.0	.0	.0	.0	56.8	.0					

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (include area code)

13. DATE SIGNED

PAGE 2 OF _____

Date 3/2/10

I, Robert Fehringer President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by
Fehringer Surveying, P.C. on the
(Contractor or Subcontractor)

WTC - Path Foundations that during the payroll period commencing on the
(Building or Work)

1st day of February, 2010, and ending the 28th 31st day of February, 2010,
all persons employed on said project have been paid the full weekly wages earned, that no rebates have
been or will be made either directly or indirectly to or on behalf of said

Fehringer Surveying, P.C. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly
from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part
3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948,
63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

None

(2) That any payrolls otherwise under this contract required to be submitted for the above period are
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the
applicable wage rates contained in any wage determination incorporated into the contract; that the
classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide
apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of
Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a
State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in
the above referenced payroll, payments of fringe benefits as listed in the contract
have been or will be made to appropriate programs for the benefit of such
employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid,
as indicated on the payroll, an amount not less than the sum of the applicable
basic hourly wage rate plus the amount of the required fringe benefits as listed
in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Bernice A. Fehringer

BERNICE A. FEHRINGER
Notary Public, State of New York
No. 01FE602 7706
Qualified in Nassau County
Commission Expires July 12, 2011

NAME AND TITLE

Robert Fehringer, Pres.

SIGNATURE

Robert Fehringer

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
31 OF THE UNITED STATES CODE.

25

MONTHLY EMPLOYMENT UTILIZATION REPORT

USER INSTRUCTIONS:

1. Please read reverse side of this form for detailed instructions
2. Complete all applicable information, leave shaded boxes blank.
3. If more than 1 page is used, complete all information for "TOTAL THIS MONTH" and "GRAND TOTAL TO DATE" on last page only.
4. ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

This form submitted w/ payment application #

LIST SUBCONTRACTORS INCLUDED IN THIS REPORT (IF ANY)

FOR R.E. OFFICE USE ONLY
REVIEWED BY:
DATE RECEIVED: 1 / 1

PAGE of

Project Title:
WTC Path Foundations
Contract # or TAA #:
WTC 614.001 W015
Location:
WTC - NYC

Prime Contractor's Name:
T. Moriarty & Son, Inc.
Address:
63 Creamer St.
Phone:
Brooklyn, NY 11231
Prepared By: _____ Date

- 1 Fehring Surveying
-
-
-
-
-
-

Reporting Period
From: Feb. 1
To: Feb 28, 10
% of Completion

Contract Goals
MINORITY
Skilled 30 %
Laborer 40 %
FEMALE
Skilled/Labor 6.9 %

Actual Start Date
Projected Completion Date

WORK HOURS OF EMPLOYEES

#1 Construction Trade	#2 Classification	#3 Total All Employee Hours		#4 Sum of All Employee Hours (Add 3M + 3F)	#5 Black		#6 Hispanic		#7 Asian		#8 Native American		#9 Total Minority Hours (Add 5 thru 8)	#10 % Minority Hours (#9 DIV #4)	#11 % Female Hours (#3F DIV #4)	#12 Total Number of Employees		#13 Total Number of Minority Employees	
		M	F		M	F	M	F	M	F	M	F			M	F	M	F	
Surveying	JOURNEY WORKER	28	0	28									0			2	0	0	0
	APPRENTICE																		
	SUBTOTAL	28	0	28									0			2	0	0	0
	JOURNEY WORKER																		
	APPRENTICE																		
	SUBTOTAL																		
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	28	0	28									0			2	0	0	0
	TOTAL APPRENTICE																		
	TOTAL SKILLED TRADES																		
GRAND TOTAL FROM LAST MONTH	SKILLED TRADES	312	0	312															
	LABORERS																		
GRAND TOTAL TO DATE	SKILLED TRADES	340	0	340									0						
	LABORERS																		

For R.E. Office Use Only
Reviewed By: _____
Date: _____

Are Goals Being Met? Circle One
Minority Female
Yes No Yes No

COMPANY OFFICIAL'S SIGNATURE AND TITLE: Robert Fehring, President DATE SIGNED: 03/02/2010

*Superintendents' hours should not be included in this form.

NOTE: The MEUR must be submitted within 5 business days of month end.

[Handwritten Signature]

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS															
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783															
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION						PROJECT OR CONTRACTOR NO.									
		Feb 13, 2010		WTC PATH: Foundations & Stair Modifications						WTC-614.001 WO#15									
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH. HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS				NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER		TOTAL DEDUCTIONS
				Hours Worked															
Avraam Papazoglou		8601	S	6							6	52.47	314.82						
Frank Van Brunt		8601	S	6							6	41.11	246.66						
			S																
			S																
			S																
			S																
			S																
			S																
			S																
			S																

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/> SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC		2200 Jackson Avenue, Seaford, New York 11783																
FEIN	FOR WEEK ENDING	PROJECT AND LOCATION							PROJECT OR CONTRACTOR NO.									
	February 20, 2010	WTC PATH: Foundations & Stair Modifications							WTC-614.001 WO#15									
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS				NET WAGES PAID FOR WEEK	
			ST or OT	M	T	W	Th	F	Sa				S	FICA	WITH-HOLDING	NY w/h		OTHER
			Hours Worked															
Avraam Papazoglou		8601		2	2					4	52.47	209.88						
Frank Van Brunt		8601		2	2					4	41.11	164.44						

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		Feb. 27, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST OF	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER	TOTAL DEDUCTIONS		
				22	23	24	25	26	27											
Avraam Papazoglou		8601	\$			3	1					4	52.47	209.88						
Frank Van Brunt		8601	\$			3	1					4	41.11	164.44						
			\$																	
			\$																	
			\$																	
			\$																	
			\$																	
			\$																	
			\$																	

THE PORT AUTHORITY OF NY & NJ
MONTHLY EMPLOYMENT UTILIZATION REPORT

SEE INSTRUCTIONS:
Please read reverse side of this form for detailed instructions.
Complete all applicable information, leave shaded boxes blank.
If more than 1 page is used, complete all information for
TOTAL THIS MONTH and GRAND TOTAL TO DATE ON LAST PAGE ONLY.
ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

THIS FORM SUBMITTED W/ PAYMENT APPL#	LIST SUBCONTRACTORS INCLUDED IN THIS REPORT (IF ANY)	DATE RECEIVED	PAGE 1 of 1
PRIME CONTRACTOR'S NAME Mid City Elec Corp	REPORT FROM W/E 2/3/10	TO: 2/24/10	CONTRACT GOALS
ADDRESS: 2190 McDonald Ave Bklyn NY 11223	PHONE: 718 333-2522	DATE: 3/3/10	ACTUAL START DATE 7/20/09
PROJECT TITLE World Trade CTR NYC			PROJECTED COMPLETION DATE 1/1
			MINORITY Skilled 30% Laborer 40% FEMALE Skilled/Laborer 6.9%

#1 CONSTRUCTION TRADE	#2 CLASSIFICATION	#3 WORKHOURS OF EMPLOYEES												#12 NUMBER OF EMPLOYEES					
		TOTAL ALL EMPLOYEES HOURS		SUM OF ALL EMPLOYEES HOURS		BLACK		HISPANIC		ASIAN		NATIVE AMERICAN		#9 TOTAL MINORITY HOURS (9 DIV 4)	#10 % MINORITY HOURS (9 DIV 4)	#11 % FEMALE HOURS (9 DIV 4)	#12 TOTAL NUMBER OF EMPLOYEES		#13 TOTAL NUMBER OF MINORITY EMPLOYEES
		M	F	(M+F)	M	F	M	F	M	F	M	F				M	F	M	F
Electrical	JOURNEY WORKER	222	-	222														2	
	APPRENTICE	90	-	90															
	SUB TOTAL	312	-	312														1	
	JOURNEY WORKER																	3	
	APPRENTICE																		
	SUB TOTAL																		
	JOURNEY WORKER																		
	APPRENTICE																		
	SUB TOTAL																		
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	222		222														2	
	TOTAL APPRENTICE	90		90														1	
	TOTAL SKILLED TRADES	312	-	312														3	
	LABORERS																		
GRAND TOTAL W/ LAST MONTH	SKILLED TRADES	1608		1608															
	LABORERS																		
GRAND TOTAL TO DATE	SKILLED TRADES	1920		1920															
	LABORERS																		

ANY OFFICIAL'S SIGNATURE AND TITLE: *Francis P. ...* DATE SIGNED: 3/3/10
 NOTE: THE MEUR must be submitted within 5 business days of month end.

FOR R.E. OFFICE USE ONLY
 CONTRACT NO.
 PROJECT NO.
 REPORT NO.

FRANCOIS BACHAALANY
 Commissioner of Deeds
 City of New York, No. 2-10704
 Qualified in Kings County
 Commission Expires Jan. 1, 2011

Date 3/1/10

I, Terric McFarlin, President
(Name of signatory party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by mid
City Elec Corp on the WTC 614001#15
(Contractor or subcontractor) (Building or work)

Project; that during the payroll period commencing on the 11
day of Feb, 2010, and ending the 17 day of Feb, 2010

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said
Subcontractor from the full
(Contractor or subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c). and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a state, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract

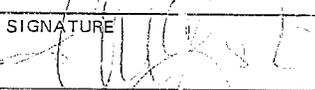
have been or will be made to appropriate programs for the benefit of said employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
REMARKS	FRANCOIS BACHAALANY Commissioner of Deeds City of New York, No. 2-10704 Qualified in Kings County Commission Expires Jan. 1, <u>2011</u>

NAME AND TITLE <u>Terric McFarlin, Pres</u>	SIGNATURE 
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

CONTRACTOR →
SUB-CONTRACTOR →

NAME MID CITY ELECTRICAL CORP			ADDRESS 2190 MCDONALD AVENUE BROOKLYN NY		
PAYROLL NO. 0	JOB NO. 1364	WEEK ENDING 02/24/10	PROJECT AND LOCATIONS WTC 614001 #15		PROJECT OR CONTRACT NO. WTC-614001#15

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY RATE	TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY						
					STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EXP	ANN	OTH	FWT	FLCA	SA	SP	GOVERNMENT	OTHER	TOTAL DEDUCTIONS							
7526	QUITSCH, MARC	Y	4.9000	15	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	OT	EXP	ANN	OTH	FWT	FLCA <td>SA</td> <td>SP</td> <td>GOVERNMENT</td> <td>OTHER</td> <td>TOTAL DEDUCTIONS</td> <td>CHECK NO.</td>	SA	SP	GOVERNMENT	OTHER	TOTAL DEDUCTIONS	CHECK NO.			
		J										70	10	70	10									257250			13509
9133	VITTI, THOMAS	Y	4.9000	15	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	OT	EXP	ANN	OTH	FWT	FLCA <td>SA</td> <td>SP</td> <td>GOVERNMENT</td> <td>OTHER</td> <td>TOTAL DEDUCTIONS</td> <td>CHECK NO.</td>	SA	SP	GOVERNMENT	OTHER	TOTAL DEDUCTIONS	CHECK NO.			
		J										70	10	70	10									83300			13513
21516	CAREY, DREW	Y	4.9000	15	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	OT	EXP	ANN	OTH	FWT	FLCA <td>SA</td> <td>SP</td> <td>GOVERNMENT</td> <td>OTHER</td> <td>TOTAL DEDUCTIONS</td> <td>CHECK NO.</td>	SA	SP	GOVERNMENT	OTHER	TOTAL DEDUCTIONS	CHECK NO.			
		A										80	80	80	80									176400			13494
Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY RATE	TRADE RATE - OVERTIME RATE	MON	TUE	WED	THUR	FRI	SAT	SUN	REG	OT	EXP	ANN	OTH	FWT	FLCA <td>SA</td> <td>SP</td> <td>GOVERNMENT</td> <td>OTHER</td> <td>TOTAL DEDUCTIONS</td> <td>CHECK NO.</td>	SA	SP	GOVERNMENT	OTHER	TOTAL DEDUCTIONS	CHECK NO.			

VOLUNTARY DEDUCTIONS:
UNION DEDUCTIONS:

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
3-PAYS
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE
B
S
R

ST	OT	REG	OT	OTHER	VAC	CITY	UNION	TOT DED	NFT FARM	EXI	CHECK TOTAL
350	470	171500	345450								
STATE	VAC	STMP									

Monthly Employment Utilization Report

U.S. Department of Labor

Employment Standards Administration - Office of Federal Contract Compliance Programs

This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

3. Current Goals	4. Reporting Period	Name and Location of Contractor	1. Covered Area (SMSA or EA)	2. Employers I.D. No.	OMB No. 1215-01633
Minority _____	From <u>2/1/2010</u>	Beach Erectors, Inc. 54 Alabama Ave. Island Park, NY 11558			
Female _____	To <u>2/28/2010</u>				
			WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing WTC - Path Station		Federal Funding Agency

5. CONSTRUCTION TRADE	Classifications	6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS										7. Minority Percentage	8. Female Percentage	9. Total Number of Employees		10. Total Number of Minority Employees		
		6a. Total All Employees Bv Trade		6b. Black (Not of Hispanic Origin)		6c. Hispanic		6d. Asian or Pacific Islander		6e. American Indian or Native American				M	F	M	F	
		M	F	M	F	M	F	M	F	M	F							
Ironworker	Journey Worker	159.5	0	31	0	0	0	0	0	0	0	19.44%	0.00%	7	0	2	0	
	Apprentice	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Trainee	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Sub-Total	159.5		31		0		0		0						7		2
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Total Journey Worker	159.5	0	31	0	0	0	0	0	0	0	19.44%	0.00%	7	0	2	0	
	Total Apprentice	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Total Trainee	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Grand Total	159.5		31		0		0		0				7		2		

11. Company Official's Signature and Title <i>Karlina Murphy, Pres.</i>	12. Telephone Number (Include area code) 516-432-5757	13. Date Signed 3/9/10	Page 1 of 1
----------------------------------------------------------------------------	----------------------------------------------------------	---------------------------	----------------

SWORN BEFORE ME THIS 3RD DAY OF MARCH, 2010

WILLIAM A. ALESIO
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 15	TAX ID No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 02/07/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID				
			02/01	02/02	02/03	02/04	02/05	02/06	02/07									
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

3/3, 2010
DATE

WILLIAM A. ALESIO
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

SEEN BEFORE ME THIS 3RD DAY OF MARCH, 2010

William Alesio

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		AGENCY Port Authority of New York and New Jersey		
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558	PHONE NO. 516 432 5757	PAYROLL No. 16
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 02/14/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8-10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			02/08	02/09	02/10	02/11	02/12	02/13	02/14									
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President

WILLIAM A. ALESIUS DATE
NOTARY PUBLIC, State of New York
No. 0144623023 - Suffolk County
Term Expires September 30, 2010

SWORN BEFORE ME THIS 3RD DAY OF MARCH, 2010

William Alesi

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

CONTRACT REGISTRATION #
WTC-614.001

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

JOB CODE
Work Order # 15

WEEK ENDING DATE
02/28/2010

PHONE NO.
516 432 5757

AGENCY
Port Authority of New York and New Jersey

PAYROLL No.
18

TAX I.D. No.

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			02/22	02/23	02/24	02/25	02/26	02/27	02/28									
Anzell Brown 3205...	J A H Foreman Ironworker	RT	7	0	0	0	0	0	0	7	41.05	287.35	37.47	U Local 580				
			HOURS WORKED EACH DAY											0				61.58
Frank Cifuni	J A H Foreman Ironworker	RT	0	0	7	0	0	0	0	7	41.05	287.35	37.47	U Local 580				
			HOURS WORKED EACH DAY											0				61.58
Peter Triolo	J A H Foreman Ironworker	RT	7	7	7	0	0	0	0	21	41.05	862.05	37.47	U Local 580				
			HOURS WORKED EACH DAY											0				61.58
Robert Lester	J A H Foreman Ironworker	RT	0	7	7	0	0	0	0	14	41.05	574.70	37.47	U Local 580				
			HOURS WORKED EACH DAY											0				61.58
	J A H	RT												U				
	J A H	OT												E				
	J A H	OT												O				
	J A H	RT												U				
	J A H	OT												E				
	J A H	OT												O				
	J A H	RT												U				
	J A H	OT												E				
	J A H	OT												O				

INSTRUCTIONS ON REVERSE SIDE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President

3/3, 2010
DATE

Sworn before me this 3rd day of March, 2010

WILLIAM A. ALESIO
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

**THE PORT AUTHORITY OF NY & NJ
MONTHLY EMPLOYMENT UTILIZATION REPORT**

USER INSTRUCTIONS:

1. Please read reverse side of this form for detailed instructions.
2. Complete all applicable information, leave shaded boxes blank.
3. If more than 1 page is used, complete all information for "TOTAL THIS MONTH", "GRAND TOTAL FROM LAST MONTH" and "GRAND TOTAL TO DATE" ON LAST PAGE ONLY.
4. ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

THIS FORM SUBMITTED
W/ PAYMENT APPL.#

LIST SUBCONTRACTORS INCLUDED
IN THIS REPORT (IF ANY)

FOR R.E. OFFICE USE ONLY

PAGE

1

PROJECT TITLE: GENERAL SITE CONSTRUCTION
VIA WORK ORDER - FOUNDATION AND STAIR
MODIFICATIONS
CONTRACT # WTC 614.001 WO #15
LOCATION: WORLD TRADE CENTER

PRIME CONTRACTOR'S NAME: T. MORIARTY & SON, INC.
ADDRESS: 63 CREAMER STREET, BROOKLYN, NY 11231
PHONE: (718) 858-4800
PREPARED BY: Patti M Smith DATE: 03/02/10

McCORMACK SMITH
CONTRACTING CO., INC.

DATE RECEIVED: / /
REPORTING PERIOD:
FROM: 1/28/2010
TO: 2/24/2010
% of completion 98%

CONTRACT GOALS
MINORITY SKILLED
LABORER
FEMALE
SKILLED/LABORERS

ACTUAL START DATE:
7/1/2009
PROJECTED COMPLETION DATE
/ /

#1 CONSTRUCTION TRADE	#2 CLASSIFICATION	#3 TOTAL ALL EMPLOYEES HOURS		#4 SUM OF ALL EMPLOYEES HOURS (Add #3M + #3F)	#5 BLACK HOURS		#6 HISPANIC HOURS		#7 ASIAN HOURS		#8 NATIVE AMERICAN HOURS		#9 TOTAL MINORITY HOURS (Add 5 Thru 8)	#10 % MINORITY HOURS (9 DIV 4)	#11 % FEMALE HOURS (3F DIV 4)	#14 TOTAL NUMBER OF EMPLOYEES		#15 TOTAL NUMBER OF MINORITY EMPLOYEES	
		M	F		M	F	M	F	M	F	M	F			M	F	M	F	
LABORERS	JOURNEY WORKER	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	APPRENTICE	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	SUB TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	#DIV/0!	#DIV/0!	0	0	0	0
OPERATING ENGINEERS LOCALS 14, 15 & 825	JOURNEY WORKER	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	APPRENTICE	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	SUB TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	#DIV/0!	#DIV/0!	0	0	0	0
EXCAVATORS AND COMMON LABORERS LOCAL 731	JOURNEY WORKER	352.5	0	352.5	0	0	172	0	0	0	0	0	172			4	0	2	0
	APPRENTICE	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	SUB TOTAL	352.5	0	352.5	0	0	172	0	0	0	0	0	172	49%	0%	4	0	2	0
BLASTERS, DRILLRUNNERS, MINERS & LABORERS LOCAL 29	JOURNEY WORKER	152	0	152	0	0	0	0	0	0	0	0	0			1	0	0	0
	APPRENTICE	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	SUB TOTAL	152	0	152	0	0	0	0	0	0	0	0	0	0%	0%	1	0	0	0
NYC CARPENTERS UNION	JOURNEY WORKER	145	0	145	0	0	0	0	0	0	0	0	0			1	0	0	0
	APPRENTICE	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	SUB TOTAL	145	0	145	0	0	0	0	0	0	0	0	0	0%	0%	1	0	0	0
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	649.5	0	649.5	0	0	172	0	0	0	0	0	172			6	0	2	0
	TOTAL APPRENTICE	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0
	TOTAL SKILLED TRADES	649.5	0	649.5	0	0	172	0	0	0	0	0	172	26%	0%	6	0	2	0
	LABORERS	0	0	0	0	0	0	0	0	0	0	0	0	#DIV/0!	#DIV/0!	0	0	0	0

GRAND TOTAL FROM LAST MONTH	SKILLED TRADES	8622.5	8	8630.5	140	8	3329	0	0	0	0	0	3477	40%	0%
	LABORERS	0	0	0	0	0	0	0	0	0	0	0	0	0%	0%

GRAND TOTAL TO DATE	SKILLED TRADES	9272	8	9280	140	8	3501	0	0	0	0	0	3649	39%	0%
	LABORERS	0	0	0	0	0	0	0	0	0	0	0	0	0%	0%

FOR R. E. OFFICE USE ONLY

REVIEWED BY:

DATE: / /

ARE GOALS BEING MET? CIRCLE ONE

MINORITY	FEMALE
YES NO	YES NO
YES NO	YES NO

COMPANY OFFICIAL'S SIGNATURE AND TITLE:

Patti M Smith PRESIDENT

DATE SIGNED: 3-2-10

* Superintendent's hours should not be included in this form

NOTE: The MEUR must be submitted within 5 business days of the month end

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1 PAGE 1

WEEK ENDING

FEB. 3, 2010

PROJECT - LOCATION WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)	
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER DEDUCTIONS		
			HOURS WORKED EACH DAY																	
SAMUEL MARTINEZ	J	S	8	8	8	8	8	/	/	40	36.64	UNION								
			A	0	/	.5	/	/	1.5	/	/		2	54.96	EMPLOYEE					
			T																	
PATRICK McGRATH	J	S	8	8	8	8	8	/	/	40	47.88	UNION								
			A	0	/	/	/	/	/	/	1		68.13	EMPLOYEE						
			T																	
JOHN A NAROG II	J	S	8	8	8	/	/	/	/	24	36.64	UNION								
			A	0	/	/	/	/	/	/	0			EMPLOYEE						
			T																	
DAVID DELPRIORE	J	S	8	8	8	8	8	/	/	40	41.28	UNION								
			A	0	/	/	/	/	/	/	0			EMPLOYEE						
			T																	
	J	S									UNION									
	A	O									EMPLOYEE									
	T	O									UNION									
	J	S									UNION									
	A	O									EMPLOYEE									
	T	O									UNION									

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE Patti M. Smith PATTI M. SMITH, PRESIDENT

3-3-10

Sworn to before me this 3rd day of MARCH 2010

Theresa Crawley
Notary Public
THERESA CRAWLEY
Notary Public - State of New York
NO. 01CR4894746
Qualified in Putnam County
My Commission Expires 5/31/11

NAME OF CONTRACTOR / SUB-CONTRACTOR
McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS
11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No. **1** PAGE **1**
WEEK ENDING **FEBRUARY 10, 2010**

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) ✓ IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) ✓ TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)		
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS			
			HOURS WORKED EACH DAY																			
SAMUEL MARTINEZ	✓	J	S	8	8	/	8	/	/	/	24	36. ⁶⁴	UNION									
			A	/	/	/	/	/	/	0		879. ³⁶		EMPLOYEE								
			T	/	/	/	/	/	/	0												
PATRICK McGRATH	✓	J	S	8	8	/	8	/	/	/	24	47. ⁸⁸	UNION									
			A	/	/	/	/	/	/	0		1149. ¹²		EMPLOYEE								
			T	/	/	/	/	/	/	0												
JOHN A NAROG II	✓	J	S	8	8	/	8	/	/	/	32	36. ⁶⁴	UNION									
			A	/	/	/	/	/	/	0		1172. ⁴⁸		EMPLOYEE								
			T	/	/	/	/	/	/	0												
DAVID DELPRIORE	✓	J	S	8	8	/	8	/	/	/	32	41. ²⁸	UNION									
			A	/	/	/	/	/	/	0		1320. ⁹⁶		EMPLOYEE								
			T	/	/	/	/	/	/	0												
			S									UNION										
			A									EMPLOYEE										
			J									UNION										
			A									EMPLOYEE										
			J									UNION										
			A									EMPLOYEE										

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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SIGNATURE *Patti M. Smith* PATTI M. SMITH, PRESIDENT

3-5-10

Sworn to before me this 3RD day of MARCH 2010

Theresa Crawley
Notary Public
THERESA CRAWLEY
Notary Public - State of New York
NO. 01CR4894746
Qualified in Putnam County
My Commission Expires 5/11/11

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL GARRISON, NY 10524

PAYROLL No.

1 PAGE 1 OF 2

WEEK ENDING

FEB 17, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Reg. Journeyman Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	
SAMUEL MARTINEZ	J	S	8	8	8	8	/	/	32	36.64	11612.16	UNION							
			0	/	/	/	8	/	/	8		54.96	EMPLOYEE						
PATRICK McGRATH	J	S	8	8	8	8	/	/	32	47.88	2077.20	UNION							
			0	/	/	/	8	/	/	8		68.13	EMPLOYEE						
JOHN A NAROG II	J	S	8	8	8	8	/	/	24	36.64	1319.04	UNION							
			0	/	/	/	8	/	/	8		54.96	EMPLOYEE						
DAVID DELPRIORE	J	S	8	8	8	8	/	/	32	41.28	1981.44	UNION							
			0	/	/	/	8	/	/	8		82.56	EMPLOYEE						

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

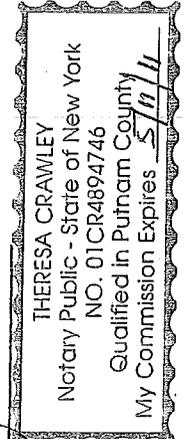
I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith
PATTI M. SMITH, PRESIDENT

3-3-10

Sworn to before me this 3rd day of MARCH 2010

Theresa Crawley
Notary Public



NAME OF CONTRACTOR / SUB-CONTRACTOR
McCORMACK SMITH CONTRACTING CO., INC.

PAYROLL No. **1** *PAGE 2 OF 2*

WEEK ENDING **FEB. 17, 2010**

ADDRESS
11 BLACK DIAMOND HILL, GARRISON, NY 10524

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE** WIC614.001 WO 15
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) LIST CRAFT & CIRCLE WORK CLASSIF. <input checked="" type="checkbox"/> IF US CITIZEN <input type="checkbox"/> Reg. Apprentice <input type="checkbox"/> Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)
		M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	
IVAN MANGUAL	J	S	/	/	/	/	8	/	8	36.64	403.04	UNION						
	A	O	/	/	/	/	2	/	2	51.96		EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
	J	S	/	8	8	/	/	/	16	36.64	723.64	UNION						
	A	O	/	25	/	/	/	/	25	137.40		EMPLOYEE						
JOSEPH S. SAPIO	J	S										UNION						
	A	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

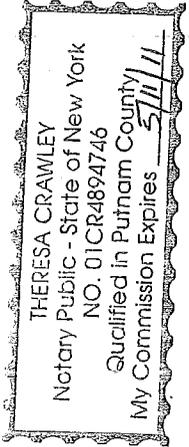
I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE *Patti M. Smith* **PATTI M. SMITH, PRESIDENT**

3-3-10

Sworn to before me this 3rd day of MARCH 2010

Theresa Crawley
Notary Public



NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No. **1** PAGE **1** OF **2**

WEEK ENDING **FEB. 24, 2010**

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)		
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS	
			HOURS WORKED EACH DAY																		
SAMUEL MARTINEZ	✓	J	S	8	8	8	8	8	/	/	40	36.64	EMPLOYEE								
			A	/	/	/	/	/	/	/	0			1465.60							
			T																		
			J	S																	
			A	O																	
PATRICK McGRATH	✓	J	S	8	8	8	8	8	/	/	40	47.88	EMPLOYEE								
			A	/	/	/	/	/	/	/	0			1915.20							
			T																		
			J	S																	
			A	O																	
JOHN A NAROG II	✓	J	S	8	8	8	8	8	/	/	40	36.64	EMPLOYEE								
			A	/	/	/	/	/	/	/	0			1465.60							
			T																		
			J	S																	
			A	O																	
DAVID DELPRIORE	✓	J	S	8	8	8	8	8	/	/	40	41.28	EMPLOYEE								
			A	/	/	/	/	/	/	/	0			1651.20							
			T																		
			J	S																	
			A	O																	

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith PATTI M. SMITH, PRESIDENT

3-3-10

Sworn to before me this 3RD day of MARCH 2010

Theresa Crawley
Notary Public

Theresa CRAWLEY
Notary Public - State of New York
NO. 01CR4894746
Qualified in Putnam County
My Commission Expires 5/1/11

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1 PAGE 2 OF 2 FEB. 24, 2010

WEEK ENDING

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) LIST CRAFT & CIRCLE WORK CLASSIF IF US CITIZ Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)
		M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER DEDUCTIONS	
IVAN MANGUAL	J	S	8	8	/	/	/	/	16	36.64	586.24	UNION						
	A	O	/	/	/	/	/	/	0			EMPLOYEE						
	T	S										UNION						
	J	O										EMPLOYEE						
	A	S										UNION						
	T	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
JOSEPH S. SAPIO	J	S	8	8	/	8	8	/	32	36.64	1282.40	UNION						
	A	O	/	/	/	2	/	2	54.96			EMPLOYEE						
	T	S										UNION						
	J	O										EMPLOYEE						
	A	S										UNION						
	T	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						
	T	S										UNION						
	J	O										EMPLOYEE						
	A	S										UNION						
	T	O										EMPLOYEE						
	J	S										UNION						
	A	O										EMPLOYEE						

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE

[Signature] PATTI M. SMITH, PRESIDENT

3-3-10

Sworn to before me this 3RD day of MARCH 2010

[Signature]
Notary Public

Theresa CRAWLEY
Notary Public - State of New York
NO. 01CR4894746
Qualified in Putnam County
My Commission Expires 5/1/11

Date 4-20-10

I, Anthony Marco Executive Vice President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

T. Moriarty & Son, Inc.

(Contractor or Subcontractor)

on the

WTC-614.001 W0#15

(Building or Work)

that during the payroll period commencing on the 25th day of February, 2000, and ending the 24th day of March, 2000,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

T. Moriarty & Son, Inc.

(Contractor or Subcontractor)

from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor; or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

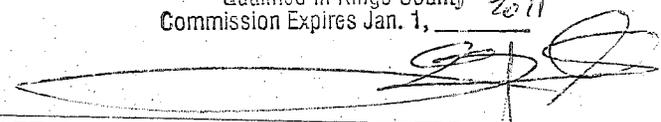
Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

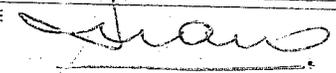
REMARKS:

FRANCOIS BACHAALANY
Commissioner of Deeds
City of New York, No. 2-10704
Qualified in Kings County
Commission Expires Jan. 1, 2011



NAME AND TITLE
Anthony Marco
Executive Vice President

SIGNATURE



THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

CONTRACTOR →
SUB-CONTRACTOR →

NAME			ADDRESS			
T MORIARTY & SON INC			63 CREAMER STREET		BROOKLYN NY	
PAYROLL NO. 28	JOB NO. 91415	WEEK ENDING 03/10/10	PROJECT AND LOCATIONS EARLY WKS FOUND			PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY															
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX P	OTHER	VAC	TAX	FED	SOC SEC	SUI	GOVERNMENT	OTHER	NET PAY																
17226	BARAJAS, JORGE A	Y	36640 15	MON	80	TUE	80	WED	80	THU	80	FRI	80	SAT	0	SUN	0	REG	0	OT	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.			
				731	LA-ENG LA	80	0	80	0	80	0	80	0	80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				JS	TOTAL	80	0	400	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	29249.
21505	CARDENAS, JUAN C	Y	36640 15	MON	0	TUE	0	WED	0	THU	0	FRI	0	SAT	0	SUN	0	REG	0	OT	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.			
				731	LA-ENG LA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				JS	TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29029	EDWARDS, LINUS	Y	36640 15	MON	80	TUE	80	WED	80	THU	80	FRI	80	SAT	0	SUN	0	REG	0	OT	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.			
				731	LA-ENG LA	80	0	80	0	80	0	80	0	80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				JB	TOTAL	80	0	320	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	29253.
35464	FITZGERALD, JOE A	Y	36640 15	MON	80	TUE	80	WED	80	THU	80	FRI	80	SAT	80	SUN	0	REG	0	OT	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.			
				731	LA-ENG LA	80	0	80	0	80	0	80	0	80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				J	TOTAL	80	0	304	0	120	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	29255.
35574	FLORES, JESUS J	Y	36640 15	MON	80	TUE	80	WED	80	THU	80	FRI	80	SAT	80	SUN	0	REG	0	OT	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.			
				731	LA-ENG LA	80	0	80	0	80	0	80	0	80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				JS	TOTAL	80	0	400	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	29256.
39589	GUEJO, LEONEL GONCA	Y	36640 15	MON	80	TUE	80	WED	80	THU	80	FRI	80	SAT	0	SUN	0	REG	0	OT	0	VAC	0	TAX	0	FED	0	SOC SEC	0	SUI	0	CHECK NO.			
				731	LA-ENG LA	80	0	80	0	80	0	80	0	80	0	80	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				JS	TOTAL	80	0	320	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	29259.

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE
L - LEAD
B - BOSS
O - OTHER

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 29	JOB NO. 91415	WEEK ENDING 03/17/10	EARLY WKS FOUND		PROJECT AND LOCATIONS
					PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS		NET PAY		
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	OTHER	GOVERNMENT	OTHER						
17226	BARAJAS, JORGE A	Y	36640 15	80	0	80	0	0	0	0	0	0	0	0	0	29344		
				731	LA-ENG LA	80	0	80	0	0	0	0	0	0	0		0	CHECK NO.
				JS	TOTAL	80	0	400	0	0	0	0	0	0	0		TOTAL DEDUCTIONS	
26983	DONNELLY, JOHN	Y	35640 15	80	0	0	0	0	0	0	0	0	0	0	29348			
				731	LA-ENG LA	0	0	0	0	0	0	0	0	0		0	CHECK NO.	
				J	TOTAL	0	0	80	0	0	0	0	0	0		0		TOTAL EARNINGS 28512
29029	EDWARDS, LINUS	V	36640 15	80	0	80	0	0	0	0	0	0	0	0	29349			
				731	LA-ENG LA	80	0	80	0	0	0	0	0	0		0	CHECK NO.	
				JB	TOTAL	0	0	320	0	0	0	0	0	0		0		TOTAL EARNINGS 117248
35464	FITZGERALD, JOE A	Y	36640 15	80	0	80	0	0	0	0	0	0	0	29351				
				731	LA-ENG LA	0	0	0	0	0	0	0	0		0	CHECK NO.		
				J	TOTAL	50	0	210	0	0	0	0	0		0		0	TOTAL EARNINGS 76944
35574	FLORES, JESUS J	Y	36640 15	80	0	80	0	0	0	0	0	0	0	29352				
				731	LA-ENG LA	80	0	80	0	0	0	0	0		0	CHECK NO.		
				JS	TOTAL	80	0	400	0	0	0	0	0		0		0	TOTAL EARNINGS 146560
39589	GUEJO, LEONEL GONCA	Y	36640 15	80	0	80	0	0	0	0	0	0	0	29355				
				731	LA-ENG LA	50	0	80	0	0	0	0	0		0	CHECK NO.		
				JS	TOTAL	80	0	370	0	0	0	0	0		0		0	TOTAL EARNINGS 135568

CODE 1
OPP. ENG. CODE CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME			ADDRESS		
T MORIARTY & SON INC			63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 30	JOB NO. 91415	WEEK ENDING 03/24/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS			NET PAY		
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	OTHER	VAC	TAX	FED	GOVERNMENT	OTHER	NET PAY			
61941	MONTES, BALTAZAR F	V		8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0	0	
				10	LA-LABORE	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				J	36510SR20 36510 15	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL					TOTAL EARNINGS 208107					TOTAL DEDUCTIONS 12			29470.		
78397	RUBINO, ANTHONY J	V		8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				10	LA-LABORE	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				J	36510 15	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL					TOTAL EARNINGS 151517					TOTAL DEDUCTIONS 12			29472.		
19778	BROTHERS, SEAN R	V		8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				14	OE-OP. ENG	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				J	33070 20	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL					TOTAL EARNINGS 217952					TOTAL DEDUCTIONS 208			29473.		
59037	MARTINEZ, ROBERTO L	V		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
				15	OE-OP. ENG	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				JS	51780 20	0	0	0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL					TOTAL EARNINGS 105963					TOTAL DEDUCTIONS 10			29476.		
60863	MENDEZ, DANIEL A	V		8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				29	LA-LA DRI	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				JS	32080 20	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL					TOTAL EARNINGS 231168					TOTAL DEDUCTIONS 1			29550.		
64493	NIEDOSPIAL, JOHN J	V		8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0		
				29	LA-LA DRI	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				J	32080 20	8.0	0	8.0	0	0	0	0	0	0	0	0	0	0	0
				TOTAL					TOTAL EARNINGS 231168					TOTAL DEDUCTIONS 1			29551.		

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME			ADDRESS		
T MORIARTY & SDN INC			63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 30	JOB NO. 91415	WEEK ENDING 03/24/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED							EARNINGS							DEDUCTIONS				NET PAY			
				ST	O.T.	ST	O.T.	O.T.	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY							
26004	DEFREN, JOSEPH R	V	79 LA-MAS TE	80	0	80	0	0																	
				80	0	80	0	0																	
				80	0	400	0	0																	
		J	32240 15	TOTAL							TOTAL EARNINGS 131960							TOTAL DEDUCTIONS				29439			
36465	FULLER, VINCENT M	Y	100 CA-CARPEN	80	0	80	0	0																	
				50	0	80	0	85																	
				80	0	370	85	0																	
		JB	44610 R20 15	TOTAL							TOTAL EARNINGS 274478							TOTAL DEDUCTIONS				29433			
17226	BARAJAS, JORGE A	V	731 LA-ENG LA	80	0	80	0	0																	
				80	0	80	0	85																	
				80	0	400	85	0																	
		JS	36640 R20 15	TOTAL							TOTAL EARNINGS 208848							TOTAL DEDUCTIONS				29443			
26983	DONNELLY, JOHN	V	731 LA-ENG LA	0	0	0	0	0																	
				0	0	0	0	0																	
				0	0	0	0	0																	
		J	36640 15	TOTAL							TOTAL EARNINGS 163175							TOTAL DEDUCTIONS				HAND-CD. 641. A			
35464	FITZGERALD, JOE A	Y	731 LA-ENG LA	80	0	80	0	0																	
				80	15	80	0	85																	
				80	0	400	100	0																	
		J	36640 15	TOTAL							TOTAL EARNINGS 201520							TOTAL DEDUCTIONS				29450			
35574	FLORES, JESUS J	Y	731 LA-ENG LA	80	0	80	0	0																	
				80	0	80	0	85																	
				80	0	400	85	0																	
		JS	36640 R20 15	TOTAL							TOTAL EARNINGS 208848							TOTAL DEDUCTIONS				29451			

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
L - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR
SUB-CONTRACTOR

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 30	JOB NO. 91415	WEEK ENDING 03/24/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS					NET PAY														
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX	OT	FW	GOVERNMENT	OTHER	TOTAL DEDUCTIONS																		
39589	GUEJO, LEONEL GONCA	V	731 36640SR20 36640 15	MON		TUE		WED		THUR		FRI		SAT		SUN		REG		VAC		OT		FWT		GOV		OTHER		CHECK NO.			
				80		80		80		85																							
				TOTAL																													
66165	OCEGUERA, ALFONSO	Y	731 36640SR20 36640 15	MON		TUE		WED		THUR		FRI		SAT		SUN		REG		VAC		OT		FWT		GOV		OTHER		CHECK NO.			
				80		80		80		85																							
				TOTAL																													
72259	PATULLO, ANTONIO	V	731 41140 15	MON		TUE		WED		THUR		FRI		SAT		SUN		REG		VAC		OT		FWT		GOV		OTHER		CHECK NO.			
				80		80		80		85																							
				TOTAL																													
77275	ROYES, NORMAN O	Y	731 36640SR20 36640 15	MON		TUE		WED		THUR		FRI		SAT		SUN		REG		VAC		OT		FWT		GOV		OTHER		CHECK NO.			
				80		80		80		85																							
				TOTAL																													
91146	VIANI, ENRICO	Y	731 39140SR20 39140 15	MON		TUE		WED		THUR		FRI		SAT		SUN		REG		VAC		OT		FWT		GOV		OTHER		CHECK NO.			
				80		80		80		85																							
				TOTAL																													

VOLUNTARY DEDUCTIONS:
UNION DEDUCTIONS:

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
17-PAYS
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

STATE	VAC	STAMP	CITY	UNION	TOT DED	NET EARN	EXP	CHECK TOTAL
-------	-----	-------	------	-------	---------	----------	-----	-------------

U.S. DEPARTMENT OF LABOR

Employment Standards Administration, OFCCP

This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

**MONTHLY EMPLOYMENT
UTILIZATION REPORT**

1. COVERED AREA (SMSA OR EA)

2. EMPLOYERS I.D. NO.
11-1837614

3. CURRENT GOALS

MINORITY: _____
FEMALE: _____

4. REPORTING PERIOD

FROM: 02/25/10
TO: 03/24/10

91415 EARLY WKS FOUND 61400115 (MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL
FUNDING
AGENCY

6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES				
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	M	F	M	F	
		M	F	M	F	M	F	M	F	M	F							
10 LA-LABORER	Journey worker	289.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			2	0	0	0
	APPRENTICE																	
	TRAINEE																	
	SUB-TOTAL	289.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			2	0	0	0
14 OE-OP ENGI	Journey worker	141.5	.0	8.0	.0	.0	.0	.0	.0	.0	.0	5.7	.0		2	0	0	0
	APPRENTICE														4	0	1	0
	TRAINEE																	
	SUB-TOTAL	141.5	.0	8.0	.0	.0	.0	.0	.0	.0	.0	5.7	.0		4	0	1	0
15 OE-OP ENGI	Journey worker	156.5	.0	49.0	.0	81.5	.0	.0	.0	.0	.0	83.4	.0		5	0	2	0
	APPRENTICE																	
	TRAINEE																	
	SUB-TOTAL	156.5	.0	49.0	.0	81.5	.0	.0	.0	.0	.0	83.4	.0		5	0	2	0
29 LA-LA DRIL	Journey worker	272.0	.0	8.0	.0	128.0	.0	.0	.0	.0	.0	50.0	.0		4	0	2	0
	APPRENTICE																	
	TRAINEE (F)	8.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0		1	0	0	0
	SUB-TOTAL	280.0	.0	8.0	.0	128.0	.0	.0	.0	.0	.0	48.6	.0		5	0	2	0
46 LT-LATHERS	Journey worker	62.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0		3	0	0	0
	APPRENTICE																	
	TRAINEE (F)	19.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0		1	0	0	0
	SUB-TOTAL	81.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0		4	0	0	0
TOTAL JOURNEY WORKERS																		
TOTAL APPRENTICES																		
TOTAL TRAINEES																		
GRAND TOTAL																		

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (include area code)

13. DATE SIGNED

PAGE 1 OF _____

U.S. DEPARTMENT OF LABOR Employment Standards Administration, OFCCP		MONTHLY EMPLOYMENT UTILIZATION REPORT		1. COVERED AREA (SMSA OR EA)		3. CURRENT GOALS MINORITY: _____ FEMALE: _____		4. REPORTING PERIOD FROM: 02/25/10 TO: 03/24/10									
91415 EARLY WKS FOUND		61400115 (MONTH)		2. EMPLOYERS I.D. NO. 11-1837614						NAME AND LOCATION OF CONTRACTOR T MORIARTY & SON INC 63 CREAMER STREET BROOKLYN NY 11231				FEDERAL FUNDING AGENCY			
CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES			
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	M	F	M	F
		M	F	M	F	M	F	M	F	M	F			M	F	M	F
79 LA-MAS TEN	Journey worker	135.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	135.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
100 CA-CARPENT	Journey worker	203.5	.0	163.5	.0	.0	.0	.0	.0	.0	.0	80.3	.0	3	0	1	0
	APPRENTICE																
	TRAINEE																
	(F)	40.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	SUB-TOTAL	243.5	.0	163.5	.0	.0	.0	.0	.0	.0	.0	67.1	.0	4	0	1	0
731 LA-ENG LAB	Journey worker	1247.5	.0	256.5	.0	831.5	.0	.0	.0	.0	.0	87.2	.0	10	0	8	0
	APPRENTICE																
	TRAINEE																
	(F)	174.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	SUB-TOTAL	1422.0	.0	256.5	.0	831.5	.0	.0	.0	.0	.0	76.5	.0	11	0	8	0
	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL																
	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL																
TOTAL JOURNEY WORKERS		2508.0	.0	485.0	.0	1041.0	.0	.0	.0	.0	.0	50.8	.0	32	0	14	0
TOTAL APPRENTICES		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
TOTAL TRAINEES		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
	(F)	241.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	4	0	0	0
	(M)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
	(D)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
GRAND TOTAL		2749.5	.0	485.0	.0	1041.0	.0	.0	.0	.0	.0	55.5	.0	36	0	14	0
11. COMPANY OFFICIAL'S SIGNATURE AND TITLE				12. TELEPHONE NUMBER(include area code)				13. DATE SIGNED				PAGE 2 OF _____					

Date 4/1/10

I, Robert Fehring President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Fehring Surveying, P.C. on the
(Contractor or Subcontractor)

WTC - Path Foundations that during the payroll period commencing on the
(Building or Work)

1st day of March, 2010, and ending the 31st day of March, 2010.

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Fehring Surveying, P.C. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below.

None

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Bernice A. Fehring

BERNICE A. FEHRINGER
Notary Public, State of New York
No. 01FE602 7706
Qualified in Nassau County
Commission Expires July 12, 2011

NAME AND TITLE

Robert Fehring, Pres.

SIGNATURE

Robert Fehring

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.



MONTHLY EMPLOYMENT UTILIZATION REPORT

USER INSTRUCTIONS:

1. Please read reverse side of this form for detailed instructions
2. Complete all applicable information, leave shaded boxes blank.
3. If more than 1 page is used, complete all information for "TOTAL THIS MONTH" and "GRAND TOTAL TO DATE" on last page only.
4. ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

This form submitted w/ payment application # _____	LIST SUBCONTRACTORS INCLUDED IN THIS REPORT (IF ANY)	FOR R.E. OFFICE USE ONLY REVIEWED BY: _____ DATE RECEIVED: _____	PAGE _____ of _____
	1	Reporting Period From: _____ To: _____ % of Completion _____	Contract Goals MINORITY Skilled 30 % Laborer 40 % FEMALE Skilled/Laborer 6.9 %
	2		
	3		
	4		
	5		
	6		
7			

Project Title:
WTC Path Foundations
Contract # or TAA #:
WTC 614.001 W015
Location:
WTC - NYC

Prime Contractor's Name:
T. Moriarty & Son, Inc.
Address:
63 Creamer St.
Brooklyn, NY 11231
Phone: _____ Date _____
Prepared By: _____

WORK HOURS OF EMPLOYEES																					
#1 Construction Trade	#2 Classification	#3 Total All Employee Hours		#4 Sum of All Employee Hours		#5 Black		#6 Hispanic		#7 Asian		#8 Native American		#9 Total Minority Hours (Add 5 thru 8)	#10 % Minority Hours (#9 DIV #4)	#11 % Female Hours (#3F DIV #4)	#12 Total Number of Employees		#13 Total Number of Minority Employees		
		M	F	(Add 3M + 3F)	M	F	M	F	M	F	M	F	M	F	(Add 5 thru 8)	(#9 DIV #4)	(#3F DIV #4)	M	F	M	F
		Surveying	JOURNEY WORKER	26	0	26	0	0	0	0	0	0	0	0	0	0				2	
APPRENTICE																					
SUBTOTAL	26		0	26	0	0	0	0	0	0	0	0	0	0				2			
	JOURNEY WORKER																				
	APPRENTICE																				
	SUBTOTAL																				
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	26	0	26	0	0	0	0	0	0	0	0	0	0				2			
	TOTAL APPRENTICE																				
	TOTAL SKILLED TRADES																				
GRAND TOTAL FROM LAST MONTH	LABORERS																				
	SKILLED TRADES	340	0	340	0	0	0	0	0	0	0	0	0	0							
GRAND TOTAL TO DATE	LABORERS																				
	SKILLED TRADES	366	0	366	0	0	0	0	0	0	0	0	0	0							

For R.E. Office Use Only
Reviewed By: _____
Date: _____
Are Goals Being Met? Circle One
Minority: Yes No
Female: Yes No

COMPANY OFFICIAL'S SIGNATURE AND TITLE: Robert Fehringer, President DATE SIGNED: 4/1/10
*Superintendents' hours should not be included in this form. NOTE: The MEUR must be submitted within 5 business days of month end.

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		March 6, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS
				1	2	3	4	5	6	Hours Worked										
Avraam Papazoglou		8601	S				No				52.47									
Frank Van Brunt		8601	S				WORK				41.11									
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																		
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																		
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION							PROJECT OR CONTRACTOR NO.											
		March 13, 2010		WTC PATH: Foundations & Stair Modifications							WTC-614.001 WO#15											
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST OR OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK			
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS		
				Hours Worked																		
Avraam Papazoglou		8601	\$	5	9	4					9	52.47	41									
Frank Van Brunt		8601	\$	5	9	4					9	41.11										
			\$																			
			\$																			
			\$																			
			\$																			
			\$																			
			\$																			
			\$																			
			\$																			

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS															
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783															
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.							
		March 20, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15							
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER	TOTAL DEDUCTIONS	
				Hours Worked															
Avraam Papazoglou		8601	S	4							4	52.47							
Frank Van Brunt		8601	S	4							4	41.11							
			S																
			O																
			S																
			O																
			S																
			O																
			S																
			O																
			S																
			O																

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/> SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																						
FEHRINGER SURVEYING, PC		2200 Jackson Avenue, Seaford, New York 11783																						
FEIN	FOR WEEK ENDING	PROJECT AND LOCATION							PROJECT OR CONTRACTOR NO.															
11-3569555	March 31, 2010	WTC PATH: Foundations & Stair Modifications							WTC-614.001 WO#15															
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK					
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER	TOTAL DEDUCTIONS						
				Hours Worked																				
Avraam Papazoglou		8601	S	29	30	31																		
Frank Van Brunt		8601	S	WORK								41.11												
			S																					
			O																					
			S																					
			O																					
			S																					
			O																					
			S																					
			O																					
			S																					
			O																					
			S																					
			O																					

CONTRACTOR →
SUB-CONTRACTOR →

NAME MID CITY ELECTRICAL CORP	ADDRESS 2190 MCDONALD AVENUE BROOKLYN NY			
PAYROLL NO. 0	JOB NO. 1364	WEEK ENDING 03/03/10	PROJECT AND LOCATIONS WCC 614001 #15	PROJECT OR CONTRACT NO. WCC 614001 #15

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY							
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT	OTHER									
75526	QUITSCH, MARC	V	400 ZA-LOCAL	49000	15	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT	OTHER	CHECK NO.				
						7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
						TOTAL						TOTAL EARNINGS						TOTAL DEDUCTIONS				13532					
91333	VITTI, THOMAS	Y	400 ZA-LOCAL	49000	15	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT	OTHER	CHECK NO.				
						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
						TOTAL						TOTAL EARNINGS						TOTAL DEDUCTIONS				13537					
21516	CAREY, DREW	Y	401 CA-ELEC	49000	15	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT	OTHER	CHECK NO.				
						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
						TOTAL						TOTAL EARNINGS						TOTAL DEDUCTIONS				13518					
Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY							
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	EXP	ANN	OTH	FT <th>GOVERNMENT</th> <th>OTHER</th> <th>GOVERNMENT</th> <th>OTHER</th>	GOVERNMENT	OTHER	GOVERNMENT	OTHER									
				MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT		OTHER						
Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY							
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	EXP	ANN	OTH	FT <th>GOVERNMENT</th> <th>OTHER</th> <th>GOVERNMENT</th> <th>OTHER</th>	GOVERNMENT	OTHER	GOVERNMENT	OTHER									
				MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT		OTHER						
Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY							
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	EXP	ANN	OTH	FT <th>GOVERNMENT</th> <th>OTHER</th> <th>GOVERNMENT</th> <th>OTHER</th>	GOVERNMENT	OTHER	GOVERNMENT	OTHER									
				MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	EXP	ANN	OTH	FT	GOVERNMENT	OTHER	GOVERNMENT		OTHER						

Monthly Employment Utilization Report

U.S. Department of Labor

Employment Standards Administration - Office of Federal Contract Compliance Programs

This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

1. Covered Area (SMSA or EA)	2. Employers I.D. No.	OMB No. 1215-01633
------------------------------	-----------------------	--------------------

3. Current Goals Minority _____ Female _____	4. Reporting Period From 3/1/2010 To 4/4/2010	Name and Location of Contractor Beach Erectors, Inc. 54 Alabama Ave. Island Park, NY 11558	Project and Location WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing WTC - Path Station	Federal Funding Agency
----------------------------------------------------	-----------------------------------------------------	-----------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------	------------------------

5. CONSTRUCTION TRADE	Classifications	6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS										7. Minority Percentage	8. Female Percentage	9. Total Number of Employees		10. Total Number of Minority Employees	
		6a. Total All Employees By Trade		6b. Black (Not of Hispanic Origin)		6c. Hispanic		6d. Asian or Pacific Islander		6e. American Indian or Native American				M	F	M	F
		M	F	M	F	M	F	M	F	M	F						
Ironworker	Journey Worker	136	0	25	0	0	0	0	0	0	0	18.38%	0.00%	7	0	2	0
	Apprentice	0	0	0	0	0	0	0	0	0	0			0	0		
	Trainee	0	0	0	0	0	0	0	0	0	0			0	0		
	Sub-Total	136		25		0		0		0				7		2	
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Total Journey Worker	136	0	25	0	0	0	0	0	0	0	18.38%	0.00%	7	0	2	0
	Total Apprentice	0	0	0	0	0	0	0	0	0	0			0	0		
	Total Trainee	0	0	0	0	0	0	0	0	0	0			0	0		
	Grand Total	136		25		0		0		0		7		2			

11. Company Official's Signature and Title <i>Karlise Mungler</i>	12. Telephone Number (Include area code) 516-432-5757	13. Date Signed 4/13/10	Page 1 of 1
----------------------------------------------------------------------	----------------------------------------------------------	----------------------------	----------------

Subscribed before me 13 April 2010

William Alesius
WILLIAM A. ALESIOUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT TO BE SUBMITTED WITH REQUISITION FOR PAYMENT			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 19	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 03/07/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			03/01	03/02	03/03	03/04	03/05	03/06	03/07									
			HOURS WORKED EACH DAY															
Ancell Brown	J A H Foreman Ironworker	RT	0	0	0	0	0	0	4	4	82.10	328.40	74.94	U Local 580				
		OT	0	0	0	0	0	7	7	14	61.58	862.12	56.21	E O Vacation				
Ancell Brown Jr.	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
Frank Cifuni	J A H Foreman Ironworker	RT	0	0	0	0	0	0	4	4	82.10	328.40	74.94	U Local 580				
		OT	0	0	0	0	0	7	7	14	61.58	862.12	56.21	E O Vacation				
Fred Markevich	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	4	4	79.70	318.80	74.94	U Local 580				
		OT	0	0	0	0	0	7	7	14	59.78	836.92	56.21	E O Vacation				
Mark Testa	J A H Foreman Ironworker	RT	0	0	0	0	0	0	4	4	82.10	328.40	74.94	U Local 580				
		OT	0	0	0	0	0	7	7	14	61.58	862.12	56.21	E O Vacation				
Peter Triolo	J A H Foreman Ironworker	RT	0	0	0	0	7	0	4	11	55.98	615.75	51.10	U Local 580				
		OT	0	0	0	0	0	7	7	14	61.58	862.12	56.21	E O Vacation				
Robert Lester	J A H Foreman Ironworker	RT	0	0	0	0	7	0	4	11	55.98	615.75	51.10	U Local 580				
		OT	0	0	0	0	0	0	7	7	61.58	431.06	56.21	E O Vacation				
	J A H	RT												U				
		OT												E O				

**INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE**

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy _____ **Karlise Murphy** _____ **President** _____ **4/13** _____ **20 10**
 SIGNATURE NAME (Print) TITLE DATE

Sworn before me this 13 April 2010 *William A. Alesius*

WILLIAM A. ALESIUS
 NOTARY PUBLIC, State of New York
 No. 01AL4623023 - Suffolk County
 Term Expires September 30, 20 10

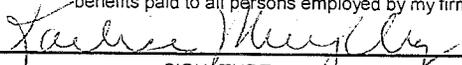
THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 20	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 03/14/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (INVS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			03/08	03/09	03/10	03/11	03/12	03/13	03/14									
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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Karlise Murphy
President
4/13, 2010

SIGNATURE NAME (Print) TITLE DATE

SWORN BEFORE ME THIS 13 APRIL 2010 

WILLIAM A. ALESIUS
 NOTARY PUBLIC, State of New York
 No. 01AL4623023 - Suffolk County
 Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

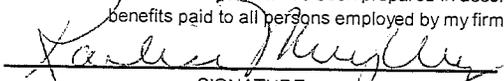
NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 21	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 03/21/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			03/15	03/16	03/17	03/18	03/19	03/20	03/21									
			HOURS WORKED EACH DAY															
Peter Triolo	J A Foreman Ironworker	RT	7	0	0	0	0	0	0	7	41.05	287.35	37.47	U Local 580				
			OT	0	0	0	0	0	0	0	0	61.58	0.00	56.21	E O Vacation			
Robert Lester	J A Foreman Ironworker	RT	7	0	0	0	0	0	0	7	41.05	287.35	37.47	U Local 580				
			OT	0	0	0	0	0	0	0	0	61.58	0.00	56.21	E O Vacation			
	J A H	RT												U				
			OT												E O			
	J A H	RT												U				
			OT												E O			
	J A H	RT												U				
			OT												E O			
	J A H	RT												U				
			OT												E O			
	J A H	RT												U				
			OT												E O			

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.


 SIGNATURE _____ NAME (Print) Karlise Murphy TITLE President DATE 4/13, 2010
Sworn before me this 13 April 2010

WILLIAM A. ALESIUS
 NOTARY PUBLIC, State of New York
 No. 01AL4623023 - Suffolk County
 Term Expires September 30, 2010

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
22

TAX ID No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
03/28/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) (9) (10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			03/22	03/23	03/24	03/25	03/26	03/27	03/28									
No Work Performed.	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																

INSTRUCTIONS ON REVERSE SIDE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President

4/13, 2010
DATE

Sworn before me this 13 April 2010

Wm Alesius

WILLIAM A. ALESIUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT
TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
23

TAX ID No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
04/04/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			03/29	03/30	03/31	04/01	04/02	04/03	04/04									
			HOURS WORKED EACH DAY															
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

INSTRUCTIONS ON REVERSE SIDE
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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

4/13, 2010
DATE

SWORN BEFORE ME THIS 13 APRIL 2010

William Alesius

WILLIAM A. ALESIUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

PAID ROLL REPORT

(TO BE SUBMITTED WITH REQUISITION FOR PAYMENT)

NAME OF CONTRACTOR / SUB-CONTRACTOR

MCCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1

WEEK ENDING

MARCH 3, 2010

PROJECT - LOCATION

WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15

CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)
		M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS	
		HOURS WORKED EACH DAY																	
SAMUEL MARTINEZ	J	S	8	8	8	2	/	/	26	36.64	1035.08	UNION							
	A	O	1.5	/	/	/	/	/	1.5	54.96		EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
PATRICK McGRATH	J	S	8	8	8	2	/	/	26	47.88	1244.88	UNION							
	A	O	/	/	/	/	/	/	0			EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
JOHN A NAROG II	J	S	8	8	8	2	/	/	26	36.64	1035.08	UNION							
	A	O	1.5	/	/	/	/	/	1.5	54.96		EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
DAVID DELPRIORE	J	S	/	8	8	4	/	/	20	41.28	825.60	UNION							
	A	O	/	/	/	/	/	/	0			EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
JOSEPH S. SAPIO	J	S	/	8	8	8	/	/	32	36.64	1172.48	UNION							
	A	O	/	/	/	/	/	/	0			EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

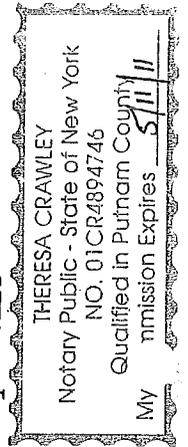
SIGNATURE *[Signature]*

PATTI M. SMITH, PRESIDENT

4/6/10

Sworn to before me this 6th day of APRIL, 2010

Theresa Crawley
Notary Public



NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1 PAGE 1 OF 1

WEEK ENDING

MARCH 10, 2010

PROJECT - LOCATION WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)	
		M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS
		HOURS WORKED EACH DAY																	
SAMUEL MARTINEZ	J	S	8	8	8	8	8	/	/	40	36.64	UNION							
	A	O	/	/	/	/	/	/	/	0		EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
PATRICK McGRATH	J	S	8	/	8	8	8	/	/	32	47.88	UNION							
	A	O	/	/	/	/	/	/	/	8	68.13	EMPLOYEE							
	J	S	/	/	/	/	/	/	/	8	85.35	UNION							
	A	O										EMPLOYEE							
JOHN A NAROG II	J	S	8	8	8	8	8	/	/	40	36.64	UNION							
	A	O	/	/	/	/	/	/	/	0		EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
DAVID DELPRIORE	J	S	8	8	8	8	8	/	/	40	41.28	UNION							
	A	O	/	/	/	/	/	/	/	0		EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							
JOSEPH S. SAPIO	J	S	8	8	/	8	8	/	/	32	36.64	UNION							
	A	O	/	/	/	/	/	/	/			EMPLOYEE							
	J	S										UNION							
	A	O										EMPLOYEE							

Sworn to before me this 6th day of April, 2010

Anna Crowley
Notary Public

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith
SIGNATURE

PATTI M. SMITH, PRESIDENT

4/6/10

NAME OF CONTRACTOR / SUB-CONTRACTOR

ADDRESS

McCORMACK SMITH CONTRACTING CO., INC.

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

WEEK ENDING

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**

1

MARCH 17, 2010

CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCT. IONS	
			HOURS WORKED EACH DAY																	
SAMUEL MARTINEZ	J	S	8	8	8	8	8		40	36.64	1465.60	EMPLOYEE								
	A	O							0			UNION								
	T											EMPLOYEE								
	J	S										UNION								
	A	O										EMPLOYEE								
PATRICK McGRATH	J	S		8	8	8	8		32	47.88	1532.16	UNION								
	A	O							0			EMPLOYEE								
	T											UNION								
	J	S										EMPLOYEE								
	A	O										UNION								
JOHN A NAROG II	J	S	8		8	8	5		29	36.64	1062.56	UNION								
	A	O							0			EMPLOYEE								
	T											UNION								
	J	S										EMPLOYEE								
	A	O										UNION								
DAVID DELPRIORE	J	S	8	8	8	8	8		40	41.28	1651.20	UNION								
	A	O							0			EMPLOYEE								
	T											UNION								
	J	S										EMPLOYEE								
	A	O										UNION								

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE Patti M. Smith

PATTI M. SMITH, PRESIDENT

4/16/10

Sworn to before me this 6th day of APRIL, 2010

Theresa Crawley
Notary Public
 THERESA CRAWLEY
Notary Public - State of New York
NO. 01CR4894746
Qualified in Putnam County
My Commission Expires 5/1/11

PAI ROLL REPORT

[TO BE SUBMITTED WITH REQUISITION FOR PAYMENT]

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1

WEEK ENDING

MARCH 24 2010

PROJECT - LOCATION

**WORLD TRADE CENTER GENERAL SITE
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS**

WTC614.001 WO 15

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)	
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER DEDUCTIONS		
SAMUEL MARTINEZ	J	A	S	8	8	8	8	8	/	/	40	36.64	UNION EMPLOYEE							
			O	/	/	/	/	/	/	/	1	54.96		1520.56						
			J												UNION					
			A												EMPLOYEE					
			T																	
			O																	
PATRICK McGRATH	J	A	S	8	8	8	8	8	/	/	40	47.88	UNION EMPLOYEE							
			O	/	/	/	/	/	/	/	0			1915.20						
			J												UNION					
			A												EMPLOYEE					
			T																	
			O																	
JOHN A NAROG II	J	A	S	8	8	8	/	/	/	/	24	36.64	UNION EMPLOYEE							
			O	/	/	/	/	/	/	/				879.36						
			J												UNION					
			A												EMPLOYEE					
			T																	
			O																	
DAVID DELPRIORE	J	A	S	8	8	8	8	8	/	/	40	41.28	UNION EMPLOYEE							
			O	/	/	/	/	/	/	/	0	0		1651.20						
			J												UNION					
			A												EMPLOYEE					
			T																	
			O																	
JOSEPH S. SAPIO	J	A	S	8	/	8	/	/	/	/	16	36.64	UNION EMPLOYEE							
			O	/	/	/	/	/	/	/	0			586.24						
			J												UNION					
			A												EMPLOYEE					
			T																	
			O																	

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

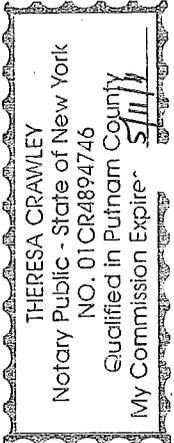
Patti M. Smith
SIGNATURE

PATTI M. SMITH, PRESIDENT

4/10/10

Sworn to before me this 6th day of April, 2010.

Theresa Crawley
Notary Public



OFFICE OF THE COMPTROLLER
DIVISION OF LABOR LAW

STATE OF NEW YORK
(TO BE SUBMITTED WITH REQUISITION FOR PAYMENT)

THE PORT AUTHORITY OF
NEW YORK & NEW JERSEY

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.

1

WEEK ENDING

MARCH 31 2010

PROJECT - LOCATION WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS	
SAMUEL MARTINEZ	✓	J	S	/	2	8	8	8	/	26	36.64	2308.32	UNION							
		A	OT	/	/	/	/	10	/	10	54.96		EMPLOYEE							
		T	OT	/	/	/	/	/	11	11	73.28		UNION							
		A	O	/	/	/	/	/	/	/	/			EMPLOYEE						
PATRICK McGRATH	✓	J	S	/	2	8	8	8	/	26	47.88	2898.36	UNION							
		A	O	/	/	/	/	10	/	10	68.13		EMPLOYEE							
		T	OT	/	/	/	/	/	11	11	88.38		UNION							
		A	O	/	/	/	/	/	/	/	/			EMPLOYEE						
JOHN A NAROG II	✓	J	S	/	/	8	8	8	/	24	36.64	879.36	UNION							
		A	O	/	/	/	/	/	/	0			EMPLOYEE							
		T	S	/	/	/	/	/	/	/	/			UNION						
		A	O	/	/	/	/	/	/	/	/			EMPLOYEE						
DAVID DELPRIORE	✓	J	S	/	/	/	8	8	/	16	41.28	1320.96	UNION							
		A	OT	/	/	/	/	8	/	8	61.92		EMPLOYEE							
		T	OT	/	/	/	/	2	/	2	82.56		UNION							
		A	O	/	/	/	/	/	/	/	/			EMPLOYEE						
	✓	J	S	/	/	/	/	/	/	/		UNION								
		A	O	/	/	/	/	/	/	/		EMPLOYEE								
		T	S	/	/	/	/	/	/	/		UNION								
		A	O	/	/	/	/	/	/	/		EMPLOYEE								

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE *Patti M. Smith*

PATTI M. SMITH, PRESIDENT

4/6/10

Sworn to before me this 6th day of April, 2010

Theresa Crawley
Notary Public



CONTRACTOR →
SUB-CONTRACTOR →

NAME				ADDRESS				PAGE NO. 1
T MORIARTY & SON INC				63 CREAMER STREET				BROOKLYN NY
PAYROLL NO. 31	JOB NO. 91415	WEEK ENDING 03/31/10	EARLY WKS FOUND PROJECT AND LOCATIONS				PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS							DEDUCTIONS				NET PAY																		
				STT	O.T.	STT	O.T.	O.T.	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	GOVERNMENT	OTHER	CHECK NO.																				
61941	MONTES, BALTAZAR F	V	10 LA-LABORE	36510	15	MON		TUE		WED		THU		FRI		SAT		SUN		REG		OT		OTHER		VAC		TAX		FED		SOC SEC		SUI					
						0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0	
						TOTAL						11318							29596																				
78397	RUBINO, ANTHONY J	Y	10 LA-LABORE	36510	15	MON		TUE		WED		THU		FRI		SAT		SUN		REG		OT		OTHER		VAC		TAX		FED		SOC SEC		SUI					
						0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0	
						TOTAL						11318							29598																				
19778	BROTHERS, SEAN R	Y	14 DE-OP ENG	33070	20	MON	80	TUE		WED		THU		FRI		SAT		SUN		REG		OT		OTHER		VAC		TAX		FED		SOC SEC		SUI					
						0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0	
						TOTAL						93408							HAND-CO. 646																				
20218	BUCHNER, JOHN R	Y	14 DE-OP ENG	33070	20	MON		TUE		WED		THU		FRI		SAT		SUN		REG		OT		OTHER		VAC		TAX		FED		SOC SEC		SUI					
						0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0	
						TOTAL						77840							HAND-CO. 647																				
50996	JAMES, FRANK A	Y	15 DE-OP ENG	49660	20	MON		TUE		WED		THU		FRI		SAT		SUN		REG		OT		OTHER		VAC		TAX		FED		SOC SEC		SUI					
						0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0	
						TOTAL						107300							29600																				
59037	MARTINEZ, ROBERTO L	Y	15 DE-OP ENG	51780	20	MON		TUE		WED		THU		FRI		SAT		SUN		REG		OT		OTHER		VAC		TAX		FED		SOC SEC		SUI					
						0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0		0	
						TOTAL						111540							29601																				

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 33	JOB NO. 91415	WEEK ENDING 04/14/10	EARLY WKS FOUND	PROJECT AND LOCATIONS	PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY RATE - OVERTIME RATE	HOURS WORKED					EARNINGS					DEDUCTIONS		NET PAY																													
				ST	O.T.	ST	O.T.	O.T.	TAXABLE EARNING	EX	OT	FW	GOVERNMENT	OTHER																															
57343	LION, NORMAN J	V	14	OE-OP ENG	MON	8.0	0	TUE	8.0	0	WED	8.0	0	THUR	8.0	0	FRI	8.0	0	SAT	0	SUN	0	REG	0	OT	0	OT	0	TOTAL	32.0	ADJ	0	TOTAL	124544	6714	TOTAL DEDUCTIONS	651.0	CHECK NO.	HAND-CD. R					
					60863	MENDEZ, DANIEL A	Y	29	LA-LA DRI	MON	8.0	0	TUE	8.0	0	WED	8.0	0	THUR	8.0	0	FRI	8.0	0	SAT	0	SUN	0	REG	0	OT	0	OT	0	TOTAL	32.0	ADJ	0	TOTAL	165120		TOTAL DEDUCTIONS		CHECK NO.	29812
										25454	REID, DANIEL	Y	46	LT-LATHER	MON	0	0	TUE	0	0	WED	0	0	THUR	0	0	FRI	0	0	SAT	0	SUN	0	REG	0	OT	0	OT	0	TOTAL	70	ADJ	0	TOTAL	37009
84777	TAN, YU HONG	Y	49	LT-3YRAPP											MON	0	0	TUE	0	0	WED	0	0	THUR	0	0	FRI	0	0	SAT	0	SUN	0	REG	0	OT	0	OT	0	TOTAL	70	ADJ	0	TOTAL	26747
					36465	FULLER, VINCENT M	Y	100	CA-CARPEN						MON	0	0	TUE	0	0	WED	0	0	THUR	0	0	FRI	0	0	SAT	0	SUN	8.0	REG	0	OT	0	OT	0	TOTAL	8.0	ADJ	0	TOTAL	77280
										36465	FULLER, VINCENT M	Y	100	CA-CARPEN	MON	0	0	TUE	0	0	WED	0	0	THUR	0	0	FRI	0	0	SAT	0	SUN	0	REG	0	OT	0	OT	0	TOTAL	100	ADJ	0	TOTAL	74295

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
JOURNEYMAN
APPRENTICE
TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME			ADDRESS					
T MORIARTY & SON INC			63 CREAMER STREET BROOKLYN NY					
PAYROLL NO. 34	JOB NO. 91415	WEEK ENDING 04/21/10	EARLY WKS FOUND PROJECT AND LOCATIONS				PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS							DEDUCTIONS			NET PAY				
				ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY							
36465	FULLER, VINCENT M	Y	100	CA-CARPEN	44610	15	0	0	0	0	100	TAXABLE EARNING	7429	0	0	0	0	0	0	0	0	0	0	29821
					ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY						
					TOTAL	ADJ	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TOTAL DEDUCTIONS	NET PAY							
56012	LAGO, NAZARIO	Y	100	CA-CARPEN	47610	15	0	0	0	0	80	TAXABLE EARNING	4399	0	0	0	0	0	0	0	0	0	0	29822
					ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY						
					TOTAL	ADJ	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TOTAL DEDUCTIONS	NET PAY							
17226	BARAJAS, JORGE A	Y	731	LA-ENG LA	36640	15	0	0	0	0	95	TAXABLE EARNING	11083	0	0	0	0	0	0	0	0	0	0	29832
					ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY						
					TOTAL	ADJ	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TOTAL DEDUCTIONS	NET PAY							
25487	DAOUD, MUAYYAD M	Y	731	LA-ENG LA	36640	15	0	0	0	0	80	TAXABLE EARNING	10259	0	0	0	0	0	0	0	0	0	0	29835
					ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY						
					TOTAL	ADJ	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TOTAL DEDUCTIONS	NET PAY							
35574	FLORES, JESUS J	Y	731	LA-ENG LA	36640	15	0	0	0	0	80	TAXABLE EARNING	2931	0	0	0	0	0	0	0	0	0	0	29839
					ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY						
					TOTAL	ADJ	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TOTAL DEDUCTIONS	NET PAY							
39589	GUEJO, LEONEL GONCA	Y	731	LA-ENG LA	36640	15	0	0	0	0	80	TAXABLE EARNING	19052	0	0	0	0	0	0	0	0	0	0	29842
					ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER	NET PAY						
					TOTAL	ADJ	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TOTAL DEDUCTIONS	NET PAY							

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
JOURNEYMAN
APPRENTICE
TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 34	JOB NO. 91415	WEEK ENDING 04/21/10	PROJECT AND LOCATIONS EARLY WKS FOUND			PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS				DEDUCTIONS				NET PAY		
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX P	O T	F W T	GOVERNMENT	V A C	OTHER	CHECK NO.				
55979	LAGO, EMILIANO	V	36640 15	M		T		S		R		V								
				J		F		S		R		V								
				W		E		S		R		V								
				731	LA-ENG LA															
				JS	36640 15															
66165	CEGUERA, ALFONSO	Y	36640 15	M		T		S		R		V								
				J		F		S		R		V								
				W		E		S		R		V								
				731	LA-ENG LA															
				JS	36640 15															
72259	PATULLO, ANTONIO	Y	41140 15	M		T		S		R		V								
				J		F		S		R		V								
				W		E		S		R		V								
				731	LA-ENG LA															
				F	41140 15															
77275	ROYES, NORMAN O	Y	36640SR20 36640 15	M		T		S		R		V								
				J		F		S		R		V								
				W		E		S		R		V								
				731	LA-ENG LA															
				JB	36640SR20 36640 15															
77275	ROYES, NORMAN O	Y	36640 15	M		T		S		R		V								
				J		F		S		R		V								
				W		E		S		R		V								
				731	LA-ENG LA															
				JB	36640 15															
91146	VIANI, ENRICO	Y	39140SR20 39140 15	M		T		S		R		V								
				J		F		S		R		V								
				W		E		S		R		V								
				731	LA-ENG LA															
				JS	39140SR20 39140 15															

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 35	JOB NO. 91415	WEEK ENDING 04/28/10	EARLY WKS FOUND	PROJECT AND LOCATIONS	PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS				NET PAY							
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EX	OT	REG	VAC	TAX	FED	SOC SEC	SUI										
72512	PEARL, MEIR A	Y	46600 20	15																							
				OE-OP ENG																							
				TOTAL																							
																						TOTAL EARNINGS	10118	TOTAL DEDUCTIONS		NET PAY	29958
60863	MENDEZ, DANIEL A	Y	32080SR20 32080 15	29																							
				LA-LA DRI																							
				TOTAL																							
																						TOTAL EARNINGS	115584	TOTAL DEDUCTIONS		NET PAY	29996
18942	BLESSINTON, JAMES P	Y	39000 15	46																							
				LT-LATHER																							
				TOTAL																							
																						TOTAL EARNINGS	174545	TOTAL DEDUCTIONS	100	NET PAY	HAND-CO. 659
19019	BOHM, GARY F	Y	42000 15	46																							
				LT-LATHER																							
				TOTAL																							
																						TOTAL EARNINGS	111027	TOTAL DEDUCTIONS		NET PAY	29997
19019	BOHM, GARY F	Y	42000 15	46																							
				LT-LATHER																							
				TOTAL																							
																						TOTAL EARNINGS	74018	TOTAL DEDUCTIONS		NET PAY	29997 V
25454	REID, DANIEL	Y	42000 15	46																							
				LT-LATHER																							
				TOTAL																							
																						TOTAL EARNINGS	111027	TOTAL DEDUCTIONS		NET PAY	29999

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP		CITY	UNION	TOT DED	NET EARN	EXP		

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MDRIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 35	JOB NO. 91415	WEEK ENDING 04/28/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS						DEDUCTIONS			NET PAY				
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	GOVERNMENT	OTHER						
26004	DEFREN, JOSEPH R	Y	79 LA-MAS TE	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TAXABLE EARNING	OTHER		\$		
				0	0	80	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	1200
				TOTAL						ADJ	0	0	0	0	0	0	0	0	0	TOTAL EARNINGS		52784	TOTAL DEDUCTIONS
36465	FULLER, VINCENT M	V	100 CA-CARPEN	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TAXABLE EARNING	OTHER		\$		
				0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0		0	0
				TOTAL						ADJ	0	0	0	0	0	0	0	0	0	TOTAL EARNINGS		77280	TOTAL DEDUCTIONS
36465	FULLER, VINCENT M	V	100 CA-CARPEN	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TAXABLE EARNING	OTHER		\$		
				0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0		0	0
				TOTAL						ADJ	0	0	0	0	0	0	0	0	0	TOTAL EARNINGS		59436	TOTAL DEDUCTIONS
56012	LAGO, NAZARIO	V	100 CA-CARPEN	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TAXABLE EARNING	OTHER		\$		
				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0
				TOTAL						ADJ	0	0	0	0	0	0	0	0	0	TOTAL EARNINGS		43992	TOTAL DEDUCTIONS
60137	MCGRATH, PATRICK J	Y	100 CA-CARPEN	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TAXABLE EARNING	OTHER		\$		
				0	0	0	0	0	80	80	0	0	0	0	0	0	0	0	0	0		0	0
				TOTAL						ADJ	0	0	0	0	0	0	0	0	0	TOTAL EARNINGS		148192	TOTAL DEDUCTIONS
17226	BARAJAS, JORGE A	Y	731 LA-ENG LA	MON	TUE	WED	THU	FRI	SAT	SUN	REG	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL	TAXABLE EARNING	OTHER		\$		
				0	0	0	0	0	80	0	0	0	0	0	0	0	0	0	0	0		0	0
				TOTAL						ADJ	0	0	0	0	0	0	0	0	0	TOTAL EARNINGS		43968	TOTAL DEDUCTIONS

CODE 1 OPP. ENG. CODE CLASSIFICATIONS	CODE 2 J - JOURNEYMAN A - APPRENTICE T - TRAINEE	ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
		STATE		VAC	STMP		CITY	UNION	TOT DED	NET EARN	EXP	

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY			
PAYROLL NO. 35	JOB NO. 91415	WEEK ENDING 04/28/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115	

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS										DEDUCTIONS				NET PAY					
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	EXP	ANN	OTH	F	W	T	S	U	I	V	A	C	O		T	H	E	R	
72259	PATULLO, ANTONIO	Y	4.140 1.5	M		T		S		R		V		E		F		S		V		O			TOTAL	49368	TOTAL DEDUCTIONS	29941
				W		F		S		R		V		E		F		S		V		O						
				LA-ENG LA	80	0	0	80	0	0																		
77275	ROYES, NORMAN O	Y	36.640 1.5	M	80	T	80	S	0	R		V		E		F		S		V		O			TOTAL	157552	TOTAL DEDUCTIONS	29944
				W		F		S		R		V		E		F		S		V		O						
				LA-ENG LA	80	0	80	20	0																			
91146	VIANI, ENRICO	Y	39.140 1.5	M	80	T	80	S	120	R		V		E		F		S		V		O			TOTAL	242668	TOTAL DEDUCTIONS	29948
				W		F		S		R		V		E		F		S		V		O						
				LA-ENG LA	80	0	0	0	0																			
				M		T		S		R		V		E		F		S		V		O			TOTAL		TOTAL DEDUCTIONS	
				W		F		S		R		V		E		F		S		V		O						

VOLUNTARY DEDUCTIONS:
UNION DEDUCTIONS :

CODE 1
OPP. ENG. CODE CLASSIFICATIONS

CODE 2
27-PAYS
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

J
A
T
B
O
U
S
R

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP			

U.S. DEPARTMENT OF LABOR Employment Standards Administration, OFCCP			MONTHLY EMPLOYMENT UTILIZATION REPORT			1. COVERED AREA (SMSA OR EA)			3. CURRENT GOALS MINORITY: _____ FEMALE: _____			4. REPORTING PERIOD FROM: 03/25/10 TO: 04/28/10					
91415 EARLY WKS FOUND			61400115 (MONTH)			NAME AND LOCATION OF CONTRACTOR T MORIARTY & SON INC 63 CREAMER STREET BROOKLYN NY11231						FEDERAL FUNDING AGENCY					
CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES			
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE						7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
10 LA-LABORER	Journey worker	60.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	60.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
14 OE-OP ENGI	Journey worker	177.0	.0	74.0	.0	.0	.0	.0	.0	.0	.0	41.8	.0	9	0	3	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	177.0	.0	74.0	.0	.0	.0	.0	.0	.0	.0	41.8	.0	9	0	3	0
15 OE-OP ENGI	Journey worker	117.5	.0	72.5	.0	36.0	.0	.0	.0	.0	.0	92.3	.0	3	0	2	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	117.5	.0	72.5	.0	36.0	.0	.0	.0	.0	.0	92.3	.0	3	0	2	0
29 LA-LA DRIL	Journey worker	146.0	.0	.0	.0	118.0	.0	.0	.0	.0	.0	80.8	.0	2	0	1	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	146.0	.0	.0	.0	118.0	.0	.0	.0	.0	.0	80.8	.0	2	0	1	0
46 LT-LATHERS	Journey worker	14.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	APPRENTICE																
	TRAINEE (F)	77.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	SUB-TOTAL	91.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	3	0	0	0
TOTAL JOURNEY WORKERS																	
TOTAL APPRENTICES																	
TOTAL TRAINEES																	
GRAND TOTAL																	
11. COMPANY OFFICIAL'S SIGNATURE AND TITLE						12. TELEPHONE NUMBER(Include area code)						13. DATE SIGNED			PAGE 1 OF _____		

U.S. DEPARTMENT OF LABOR Employment Standards Administration, OFCCP			MONTHLY EMPLOYMENT UTILIZATION REPORT			1. COVERED AREA (SMSA OR EA)			3. CURRENT GOALS MINORITY: _____ FEMALE: _____			4. REPORTING PERIOD FROM: 03/25/10 TO: 04/28/10					
<small>This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.</small>						2. EMPLOYERS I.D. NO.			NAME AND LOCATION OF CONTRACTOR T MORIARTY & SON INC 63 CREAMER STREET BROOKLYN NY 11231			FEDERAL FUNDING AGENCY					
91415 EARLY WKS FOUND			61400115 (MONTH)														
CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES			
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	M	F	M	F
		M	F	M	F	M	F	M	F	M	F						
49 LT-3YRAPP	Journey worker																
	APPRENTICE	14.0	.0	.0	.0	.0	.0	14.0	.0	.0	.0	100.0	.0	1	0	1	0
	TRAINEE																
	SUB-TOTAL	14.0	.0	.0	.0	.0	.0	14.0	.0	.0	.0	100.0	.0	1	0	1	0
79 LA-MAS TEN	Journey worker	44.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	44.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
100 CA-CARPENT	Journey worker	131.0	.0	99.0	.0	.0	.0	.0	.0	.0	.0	75.6	.0	2	0	1	0
	APPRENTICE																
	TRAINEE (F)	16.0	.0	.0	.0	16.0	.0	.0	.0	.0	.0	100.0	.0	1	0	1	0
	SUB-TOTAL	147.0	.0	99.0	.0	16.0	.0	.0	.0	.0	.0	78.2	.0	3	0	2	0
731 LA-ENG LAB	Journey worker	1156.0	.0	215.5	.0	803.5	.0	.0	.0	.0	.0	88.1	.0	9	0	7	0
	APPRENTICE																
	TRAINEE (F)	137.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	SUB-TOTAL	1293.0	.0	215.5	.0	803.5	.0	.0	.0	.0	.0	78.8	.0	10	0	7	0
	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL																
TOTAL JOURNEY WORKERS		1845.5	.0	461.0	.0	957.5	.0	.0	.0	.0	.0	76.9	.0	29	0	14	0
TOTAL APPRENTICES		14.0	.0	.0	.0	.0	.0	14.0	.0	.0	.0	100.0	.0	1	0	1	0
TOTAL TRAINEES		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
	(F)	230.0	.0	.0	.0	16.0	.0	.0	.0	.0	.0	7.0	.0	4	0	1	0
	(M)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
	(P)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
GRAND TOTAL		2089.5	.0	461.0	.0	973.5	.0	14.0	.0	.0	.0	69.3	.0	34	0	16	0
11. COMPANY OFFICIAL'S SIGNATURE AND TITLE						12. TELEPHONE NUMBER(include area code)						13. DATE SIGNED			PAGE 2 OF _____		

Date May 10, 2010

I, Robert Fehringer President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Fehringer Surveying, P.C. on the
(Contractor or Subcontractor)

WTC - Path Foundations; that during the payroll period commencing on the
(Building or Work)

1st day of April, 2010, and ending the 31st day of April, 2010.

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Fehringer Surveying, P.C. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

None

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Bernice A. Fehringer

BERNICE A. FEHRINGER
Notary Public, State of New York
No. 01FEG02 7706
Qualified in Nassau County
Commission Expires July 12, 2011

NAME AND TITLE

Robert Fehringer, President

SIGNATURE

[Signature]

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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MONTHLY EMPLOYMENT UTILIZATION REPORT

USER INSTRUCTIONS:

1. Please read reverse side of this form for detailed instructions
2. Complete all applicable information, leave shaded boxes blank.
3. If more than 1 page is used, complete all information for "TOTAL THIS MONTH" and "GRAND TOTAL TO DATE" on last page only.
4. ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

This form submitted w/ payment application #	LIST SUBCONTRACTORS INCLUDED IN THIS REPORT (IF ANY)	FOR R.E. OFFICE USE ONLY REVIEWED BY: _____ DATE RECEIVED: ____/____/____	PAGE of
	1	Reporting Period	Actual Start Date
	2	From: 4/1/10	Contract Goals
	3	To: 4/30/10	MINORITY
	4	% of	Skilled 30%
	5	Completion	Laborer 40%
	6		FEMALE
7		Skilled/Labor 6.9%	Projected Completion Date

Project Title:
WTC Path Foundations
Contract # or TAA #:
WTC 614.001 W015
Location:
WTC - NYC

Prime Contractor's Name:
T. Moriarty & Son, Inc.
Address:
63 Creamer St.
Brooklyn, NY 11231
Phone: _____
Prepared By: _____ Date _____

WORK HOURS OF EMPLOYEES

#1 Construction Trade	#2 Classification	#3 Total All Employee Hours		#4 Sum of All Employee Hours		#5 Black		#6 Hispanic		#7 Asian		#8 Native American		#9 Total Minority Hours	#10 % Minority Hours	#11 % Female Hours	#12 Total Number of Employees		#13 Total Number of Minority Employees	
		M	F	(Add 3M + 3F)		M	F	M	F	M	F	M	F	(Add 5 thru 8)	(#9 DIV #4)	(#3F DIV #4)	M	F	M	F
Surveying	JOURNEY WORKER	77	0	77	0	0	0	0	0	0	0	0	0				2	0	0	0
	APPRENTICE																			
	SUBTOTAL	77	0	77	0	0	0	0	0	0	0	0	0				2	0	0	0
	JOURNEY WORKER																			
	APPRENTICE																			
	SUBTOTAL																			
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	77	0	77	0	0	0	0	0	0	0	0	0				2	0	0	0
	TOTAL APPRENTICE																			
	TOTAL SKILLED TRADES																			
	LABORERS																			
GRAND TOTAL FROM LAST MONTH	SKILLED TRADES	366	0	366	0	0	0	0	0	0	0	0	0	0	0	0				
	LABORERS																			
GRAND TOTAL TO DATE	SKILLED TRADES	443	0	443	0	0	0	0	0	0	0	0	0	0	0	0				
	LABORERS																			

For R.E. Office Use Only
Reviewed By: _____
Date: ____/____/____
Are Goals Being Met? Circle One
Minority: Yes/No Female: Yes/No

COMPANY OFFICIAL'S SIGNATURE AND TITLE: Robert Fehringer, President DATE SIGNED: 5/10/10
*Superintendents' hours should not be included in this form. NOTE: The MEUR must be submitted within 5 business days of month end.



WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS															
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783															
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.							
		April 3, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15							
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER	TOTAL DEDUCTIONS	
				Hours Worked															
Avraam Papazoglou		8601	S									52.47							
Frank Van Brunt		8601	S									41.11							
			O																
			S																
			O																
			S																
			O																
			S																
			O																
			S																
			O																
			S																
			O																

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		April 10, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	--	OTHER		TOTAL DEDUCTIONS
				Hours Worked																
Avraam Papazoglou		8601	S	-						0	52.47									
Frank Van Brunt		8601	S	8						8	41.11									
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																				
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																				
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION						PROJECT OR CONTRACTOR NO.														
		April 17, 2010		WTC PATH: Foundations & Stair Modifications						WTC-614.001 WO#15														
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST OF	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK					
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS				
				12	13	14	15	16	17															
				Hours Worked																				
Avraam Papazoglou		8601	S			6	8					14	52.47											
Frank Van Brunt		8601	S			6	8					14	41.11											
			S																					
			S																					
			S																					
			S																					
			S																					
			S																					
			S																					
			S																					
			S																					

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS															
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783															
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.							
		April 24, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15							
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER	TOTAL DEDUCTIONS	
				19	20	21	22	23	24					Hours Worked					
Avraam Papazoglou		8601	S			5 1/2					5 1/2	52.47	282.59						
Frank Van Brunt		8601	S			5 1/2					5 1/2	41.11	226.11						
			S																
			O																
			S																
			O																
			S																
			O																
			S																
			O																

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																	
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																	
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION							PROJECT OR CONTRACTOR NO.										
		April 30, 2010		WTC PATH: Foundations & Stair Modifications							WTC-614.001 WO#15										
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK		
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	--	OTHER		TOTAL DEDUCTIONS	
				26	27	28	29	30						Hours Worked							
Avraam Papazoglou		8601	S	3		6	6					15	52.47	787.05							
Frank Van Brunt		8601	S	3		6	6					15	41.11	616.65							
			S																		
			S																		
			S																		
			S																		
			S																		
			S																		
			S																		

Monthly Employment Utilization Report

U.S. Department of Labor

Employment Standards Administration - Office of Federal Contract Compliance Programs

This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

1. Covered Area (SMSA or EA)

2. Employers I.D. No.

OMB No. 1215-01633

3. Current Goals

4. Reporting Period

Name and Location of Contractor

Project and Location

Federal Funding Agency

Minority

From 4/1/2010

Beach Erectors, Inc.

WTC-614.001 Work Order # 15 - Install Only

Female

To 4/30/2010

54 Alabama Ave.
Island Park, NY 11558

Steel Stairs & Framing
WTC - Path Station

5. CONSTRUCTION TRADE	Classifications	6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS										7. Minority Percentage	8. Female Percentage	9. Total Number of Employees		10. Total Number of Minority Employees	
		6a. Total All Employees Bv Trade		6b. Black (Not of Hispanic Origin)		6c. Hispanic		6d. Asian or Pacific Islander		6e. American Indian or Native American				M	F	M	F
		M	F	M	F	M	F	M	F	M	F						
Ironworker	Journey Worker	317	8	60	8	27	0	0	0	0	0	29.23%	2.46%	12	1	5	1
	Apprentice	0	0	0	0	0	0	0	0	0	0			0	0		
	Trainee	0	0	0	0	0	0	0	0	0	0			0	0		
	Sub-Total	325		68		27		0		0				13	6		
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Journey Worker																
	Apprentice																
	Trainee																
	Sub-Total																
	Total Journey Worker	317	8	60	8	27	0	0	0	0	0	29.23%	2.46%	12	1	5	1
	Total Apprentice	0	0	0	0	0	0	0	0	0	0			0	0		
	Total Trainee	0	0	0	0	0	0	0	0	0	0			0	0		
	Grand Total	325		68		27		0		0		13	6				

11. Company Official's Signature and Title

James M. ... PRESIDENT

12. Telephone Number (Include area code)

516-432-5757

13. Date Signed

5/1/10

Page

1 of 1

SWORN TO BEFORE ME
THIS 1ST DAY OF MAY 2010

William Alesius

WILLIAM A. ALESIUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT TO BE SUBMITTED WITH REQUISITION FOR PAYMENT				AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757		PAYROLL No. 24	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 04/11/2010		PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/05	04/06	04/07	04/08	04/09	04/10	04/11									
No Work Performed.	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

WILLIAM A. ALESIO
DATE 5/1, 2010
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

Sworn Before me
This 1st Day of MAY 2010

William Alesio

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 24	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 04/11/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

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			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/05	04/06	04/07	04/08	04/09	04/10	04/11									
			HOURS WORKED EACH DAY															
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

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Karlise Murphy
SIGNATURE

Karlise Murphy

NAME (Print)

President

TITLE

5/11, 2010
DATE

*SWORN BEFORE ME
THIS 1ST DAY OF MAY 2010*

William A. Alesius

WILLIAM A. ALESIOUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>				AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 25	TAX I.D. No. *****	
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 04/18/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED) HELPER</small>	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID				
			04/12	04/13	04/14	04/15	04/16	04/17	04/18										
			HOURS WORKED EACH DAY																
Robert Lester	J A H Foreman Ironworker	RT	0	0	0	0	7	0	2	9	50.17	451.55	45.80	U Local 580					
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E O Vacation					
Robert J. Murphy Jr.	J A H Foreman Ironworker	RT	0	0	0	0	7	0	2	9	50.17	451.55	45.80	U Local 580					
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E O Vacation					
Warren Smith	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	0	0	39.85	0.00	37.47	U Local 580					
		OT	0	0	0	0	0	10	0	10	59.78	597.80	56.21	E O Vacation					
	J A H	RT												U					
		OT												E O					
	J A H	RT												U					
		OT												E O					
	J A H	RT												U					
		OT												E O					
	J A H	RT												U					
		OT												E O					

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

5/1, 2010
DATE

Sworn Before me
This 1st Day of MAY 2010

William A. Alesius

WILLIAM A. ALESIUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 25	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 04/18/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/12	04/13	04/14	04/15	04/16	04/17	04/18									
			HOURS WORKED EACH DAY															
Anzell Brown	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
			OT	0	0	0	0	0	10	0	10	61.58	615.80	56.21	E			
Devis Caceres	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	2	2	79.70	159.40	74.94	U Local 580				
			OT	0	0	0	0	0	8	7	15	59.78	896.70	56.21	E			
Frank Cifuni	J A H Foreman Ironworker	RT	0	0	0	0	0	0	2	2	82.10	164.20	74.94	U Local 580				
			OT	0	0	0	0	0	8	7	15	61.58	923.70	56.21	E			
Fred Markevich	J A H Journeyman Ironworker	RT	0	0	0	0	7	0	2	9	48.71	438.35	45.80	U Local 580				
			OT	0	0	0	0	0	10	7	17	59.78	1016.26	56.21	E			
Jewel Jeffery	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	0	0	39.85	0.00	37.47	U Local 580				
			OT	0	0	0	0	0	8	0	8	59.78	478.24	56.21	E			
Kevin Heenan	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	0	0	39.85	0.00	37.47	U Local 580				
			OT	0	0	0	0	0	8	0	8	59.78	478.24	56.21	E			
Mark Testa	J A H Foreman Ironworker	RT	0	0	0	0	7	0	0	7	41.05	287.35	37.47	U Local 580				
			OT	0	0	0	0	0	10	4	14	61.58	862.12	56.21	E			
Peter Triolo	J A H Foreman Ironworker	RT	0	0	0	0	7	0	2	9	50.17	451.55	45.80	U Local 580				
			OT	0	0	0	0	0	11	7	18	61.58	1108.44	56.21	E			

**INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE**

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy Karlise Murphy President 5/11, 2010
SIGNATURE NAME (Print) TITLE DATE

Sworn Before Me
This 1st Day of MAY 2010

William Alesius

WILLIAM A. ALESIOUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
25

TAX I.D. No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
04/18/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS		(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/12	04/13	04/14	04/15	04/16	04/17	04/18								
Robert Lester	J A H Foreman Ironworker	RT	0	0	0	0	7	0	2	9	50.17	451.55	45.80	<input checked="" type="checkbox"/> Local 580			
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	<input type="checkbox"/> Vacation			
Robert J. Murphy Jr.	J A H Foreman Ironworker	RT	0	0	0	0	7	0	2	9	50.17	451.55	45.80	<input checked="" type="checkbox"/> Local 580			
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	<input type="checkbox"/> Vacation			
Warren Smith	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	0	0	39.85	0.00	37.47	<input checked="" type="checkbox"/> Local 580			
		OT	0	0	0	0	0	10	0	10	59.78	597.80	56.21	<input type="checkbox"/> Vacation			
	J A H	RT												<input type="checkbox"/> U			
	J A H	OT												<input type="checkbox"/> E			
	J A H	RT												<input type="checkbox"/> O			
	J A H	OT												<input type="checkbox"/> U			
	J A H	RT												<input type="checkbox"/> E			
	J A H	OT												<input type="checkbox"/> O			
	J A H	RT												<input type="checkbox"/> U			
	J A H	OT												<input type="checkbox"/> E			
	J A H	RT												<input type="checkbox"/> O			
	J A H	OT												<input type="checkbox"/> U			

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

5/11, 2010
DATE

SWORN Before Me
This 1st DAY of MAY 2010

William A. Alesius

WILLIAM A. ALESIOUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 2011

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

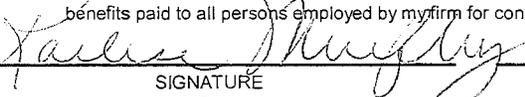
NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 25	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 04/18/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

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			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/12	04/13	04/14	04/15	04/16	04/17	04/18									
			HOURS WORKED EACH DAY															
Ancell Brown	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580					
		OT	0	0	0	0	0	10	0	10	61.58	615.80	56.21	O Vacation				
Devis Caceres	J A H Journeyman Ironworker	RT	0	0	0	0	0	2	2	79.70	159.40	74.94	U Local 580					
		OT	0	0	0	0	0	8	7	15	59.78	896.70	56.21	O Vacation				
Frank Cifuni	J A H Foreman Ironworker	RT	0	0	0	0	0	2	2	82.10	164.20	74.94	U Local 580					
		OT	0	0	0	0	0	8	7	15	61.58	923.70	56.21	O Vacation				
Fred Markevich	J A H Journeyman Ironworker	RT	0	0	0	0	7	0	2	9	48.71	438.35	45.80	U Local 580				
		OT	0	0	0	0	0	10	7	17	59.78	1016.26	56.21	O Vacation				
Jewel Jeffery	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	0	39.85	0.00	37.47	U Local 580					
		OT	0	0	0	0	0	8	0	8	59.78	478.24	56.21	O Vacation				
Kevin Heenan	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	0	39.85	0.00	37.47	U Local 580					
		OT	0	0	0	0	0	8	0	8	59.78	478.24	56.21	O Vacation				
Mark Testa	J A H Foreman Ironworker	RT	0	0	0	0	7	0	0	7	41.05	287.35	37.47	U Local 580				
		OT	0	0	0	0	0	10	4	14	61.58	862.12	56.21	O Vacation				
Peter Triolo	J A H Foreman Ironworker	RT	0	0	0	0	7	0	2	9	50.17	451.55	45.80	U Local 580				
		OT	0	0	0	0	0	11	7	18	61.58	1108.44	56.21	O Vacation				

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 SIGNATURE Karlise Murphy NAME (Print) President TITLE 5/11 DATE 2010

Sworn Before me
 This 1st DAY of MAY 2010


 NOTARY PUBLIC, State of New York
 No. 01AL4623023 - Suffolk County
 Term Expires September 30, 2012

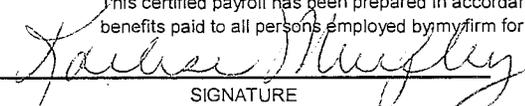
THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558	PHONE NO. 516 432 5757	PAYROLL No. 26	TAX I.D. No.	
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 04/25/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/19	04/20	04/21	04/22	04/23	04/24	04/25									
			HOURS WORKED EACH DAY															
Robert J. Murphy Jr.	J A H Foreman Ironworker	RT	0	0	0	0	0	3	4	7	82.10	574.70	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	O Vacation				
Warren Smith	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	3	3	79.70	239.10	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	59.78	418.46	56.21	O Vacation				
	J A H	RT												U				
		OT												O				
	J A H	RT												U				
		OT												O				
	J A H	RT												U				
		OT												O				
	J A H	RT												U				
		OT												O				

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Karlise Murphy
President
5/11, 2010

Sworn Before Me
This 1st Day of MAY 2010


 WILLIAM A. ALESIUS
 NOTARY PUBLIC, State of New York
 No. 01AL4623023 - Suffolk County
 Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT				AGENCY Port Authority of New York and New Jersey		
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558				PHONE NO. 516 432 5757	PAYROLL No. 26	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 04/25/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing				

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(INYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) RATE PER HOUR	(9) SUPPLEMENTAL BENEFITS		(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S					PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/19	04/20	04/21	04/22	04/23	04/24	04/25									
			HOURS WORKED EACH DAY															
Anceil Brown	J A H Foreman Ironworker	RT	0	0	0	0	0	0	3	3	82.10	246.30	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
Anceil Brown Jr.	J A H Foreman Ironworker	RT	0	0	0	0	0	0	3	3	82.10	246.30	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
Devis Caceres	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	3	3	79.70	239.10	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	59.78	418.46	56.21	E O Vacation				
Fred Markevich	J A H Journeyman Ironworker	RT	0	0	0	0	0	3	4	7	79.70	557.90	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	59.78	418.46	56.21	E O Vacation				
Mark Testa	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E O Vacation				
Peter Triolo	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E O Vacation				
Russ Collymore	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	3	3	79.70	239.10	74.94	U Local 580				
		OT	0	0	0	0	0	7	0	7	59.78	418.46	56.21	E O Vacation				
Robert Lester	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E O Vacation				

**INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE**

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

5/1, 2010
DATE

Sworn Before Me
This 1st Day of MAY 2010

William A. Alesius

WILLIAM A. ALESIOUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
26

TAX I.D. No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
04/25/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) (9) (10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/19	04/20	04/21	04/22	04/23	04/24	04/25									
Robert J. Murphy	J A H Foreman Ironworker	RT	0	0	0	0	0	3	4	7	82.10	574.70	74.94	<input checked="" type="checkbox"/> Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	<input type="checkbox"/> Vacation				
Warren Smith	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	3	3	79.70	239.10	74.94	<input checked="" type="checkbox"/> Local 580				
		OT	0	0	0	0	0	7	0	7	59.78	418.46	56.21	<input type="checkbox"/> Vacation				
	J A H	RT												<input type="checkbox"/>				
		OT												<input type="checkbox"/>				
	J A H	RT												<input type="checkbox"/>				
		OT												<input type="checkbox"/>				
	J A H	RT												<input type="checkbox"/>				
		OT												<input type="checkbox"/>				
	J A H	RT												<input type="checkbox"/>				
		OT												<input type="checkbox"/>				
	J A H	RT												<input type="checkbox"/>				
		OT												<input type="checkbox"/>				

INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE
Sworn Before Me
This 1st Day of May 2010

Karlise Murphy
NAME (Print)

President
TITLE

William A. Alesius

WILLIAM A. ALESIUS
DATE 5/1/2010
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT				AGENCY Port Authority of New York and New Jersey	
		<i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>					
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757		PAYROLL No. 26	TAX ID No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 04/25/2010		PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/19	04/20	04/21	04/22	04/23	04/24	04/25									
			HOURS WORKED EACH DAY															
Ancell Brown	J A H Foreman Ironworker	RT	0	0	0	0	0	0	3	3	82.10	246.30	74.94	U Local 580				
			0	0	0	0	0	7	0	7	61.58	431.06	56.21	E				
			0	0	0	0	0	7	0	7	61.58	431.06	56.21	O Vacation				
Ancell Brown Jr.	J A H Foreman Ironworker	RT	0	0	0	0	0	0	3	3	82.10	246.30	74.94	U Local 580				
			0	0	0	0	0	7	0	7	61.58	431.06	56.21	E				
			0	0	0	0	0	7	0	7	61.58	431.06	56.21	O Vacation				
Devis Caceres	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	3	3	79.70	239.10	74.94	U Local 580				
			0	0	0	0	0	7	0	7	59.78	418.46	56.21	E				
			0	0	0	0	0	7	0	7	59.78	418.46	56.21	O Vacation				
Fred Markevich	J A H Journeyman Ironworker	RT	0	0	0	0	0	3	4	7	79.70	557.90	74.94	U Local 580				
			0	0	0	0	0	7	0	7	59.78	418.46	56.21	E				
			0	0	0	0	0	7	0	7	59.78	418.46	56.21	O Vacation				
Mark Testa	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
			0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E				
			0	0	0	0	0	7	0	7	61.58	1046.86	56.21	O Vacation				
Peter Triolo	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
			0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E				
			0	0	0	0	0	7	0	7	61.58	1046.86	56.21	O Vacation				
Russ Collymore	J A H Journeyman Ironworker	RT	0	0	0	0	0	0	3	3	79.70	239.10	74.94	U Local 580				
			0	0	0	0	0	7	0	7	59.78	418.46	56.21	E				
			0	0	0	0	0	7	0	7	59.78	418.46	56.21	O Vacation				
Robert Lester	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
			0	0	0	0	0	10	7	17	61.58	1046.86	56.21	E				
			0	0	0	0	0	7	0	7	61.58	1046.86	56.21	O Vacation				

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE
Sworn Before me
This 1st Day of MAY 2010

Karlise Murphy
NAME (Print)
President

William Alesius

DATE 5/1, 2010
WILLIAM A. ALESIUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 27	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 05/02/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/26	04/27	04/28	04/29	04/30	05/01	05/02									
			HOURS WORKED EACH DAY															
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

INSTRUCTIONS ON REVERSE SIDE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President
TITLE

5/1, 2010
DATE

Sworn Before me
This 1st Day of MAY 2010

William A. Alesius

WILLIAM A. ALESIUS
NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 20, 2010

THE CITY OF NEW YORK • OFFICE OF THE COMPTROLLER • BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		<h2 style="margin:0;">PAYROLL REPORT</h2> <p style="margin:0;"><i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i></p>				AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 27	TAX I.D. No.	
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 05/02/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE <small>(NYS DOL REGISTERED)</small> HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(9) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			04/26	04/27	04/28	04/29	04/30	05/01	05/02									
			HOURS WORKED EACH DAY															
No Work Performed.	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						
	J A H	RT										U						
		OT										E						

INSTRUCTIONS ON REVERSE SIDE

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Karlise Murphy
SIGNATURE

Karlise Murphy
NAME (Print)

President

WILLIAM A. ALESIUS
TITLE

5/1/2010
DATE

NOTARY PUBLIC, State of New York
No. 01AL4623023 - Suffolk County
Term Expires September 30, 2010

Sworn Before me

This 1st Day of MAY 2010

William Alesius

NAME OF CONTRACTOR / SUB-CONTRACTOR: **McCORMACK SMITH CONTRACTING CO., INC.**
ADDRESS: **11 BLACK DIAMOND HILL, GARRISON, NY 10524**

PAYROLL No. **1** WEEK ENDING **APRIL 7, 2010** PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)	
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS
			HOURS WORKED EACH DAY																	
SAMUEL MARTINEZ	J	S	8	8	8	8	8	/	/	40	36.64	1520.56	UNION							
	A	O	/	/	/	/	/	/	/	1	54.96		EMPLOYEE							
	T	S											UNION							
	J	O											EMPLOYEE							
IVAN MANGUAL	J	S	8	/	/	/	/	/	/	8	36.64	293.12	UNION							
	A	O	/	/	/	/	/	/	/	0			EMPLOYEE							
	T	S											UNION							
	J	O											EMPLOYEE							
JOHN A NAROG II	J	S	8	8	/	8	8	/	/	32	36.64	1227.44	UNION							
	A	O	/	/	/	/	/	/	/	1	54.96		EMPLOYEE							
	T	S											UNION							
	J	O											EMPLOYEE							
DAVID DELPRIORE	J	S	/	5	8	/	/	/	/	13	41.28	536.64	UNION							
	A	O	/	/	/	/	/	/	/	0			EMPLOYEE							
	T	S											UNION							
	J	O											EMPLOYEE							
JOSEPH S. SAPIO	J	S	8	8	/	/	/	/	/	16	36.64	586.24	UNION							
	A	O	/	/	/	/	/	/	/	0			EMPLOYEE							
	T	S											UNION							
	J	O											EMPLOYEE							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith
SIGNATURE

PATTI M. SMITH, PRESIDENT

5/3/10

NAME OF CONTRACTOR / SUB-CONTRACTOR: **McCORMACK SMITH CONTRACTING CO., INC.** ADDRESS: **11 BLACK DIAMOND HILL, GARRISON, NY 10524**

PAYROLL No. **1** WEEK ENDING **APRIL 14, 2010** PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) <input checked="" type="checkbox"/> IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) <input checked="" type="checkbox"/> TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)							
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS						
			12	13	14	15	16	17	18																	
SAMUEL MARTINEZ	<input checked="" type="checkbox"/>	J	S	8	8	8	8	8	/	/	40	36.64	1465.60	<input checked="" type="checkbox"/>	UNION											
		A	O	/	/	/	/	/	/	/	0				<input checked="" type="checkbox"/>	EMPLOYEE										
		T	S																							
		J	O																							
		A	S																							
		T	O																							
JOHN A NAROG II	<input checked="" type="checkbox"/>	J	S	8	5	8	8	8	/	/	37	36.64	1355.68	<input checked="" type="checkbox"/>	UNION											
		A	O	/	/	/	/	/	/	/	0				<input checked="" type="checkbox"/>	EMPLOYEE										
		T	S																							
		J	O																							
		A	S																							
		T	O																							
DAVID DELPRIORE	<input checked="" type="checkbox"/>	J	S	8	8	8	8	8	/	/	40	41.28	1651.20	<input checked="" type="checkbox"/>	UNION											
		A	O	/	/	/	/	/	/	/	0				<input checked="" type="checkbox"/>	EMPLOYEE										
		T	S																							
		J	O																							
		A	S																							
		T	O																							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Signature of David DelPriore

DAVID M. DELPRIORE

4/13/10

NAME OF CONTRACTOR / SUB-CONTRACTOR

ADDRESS

MCCORMACK SMITH CONTRACTING CO., INC.

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.
1

WEEK ENDING
APRIL 21, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) <input checked="" type="checkbox"/> IF US CITIZ	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) <input checked="" type="checkbox"/> TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)		
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS	
			HOURS WORKED EACH DAY																		
SAMUEL MARTINEZ	<input checked="" type="checkbox"/>	J	S	8	8	8	8	8	/	/	40	36.64	UNION <input checked="" type="checkbox"/> EMPLOYEE								
			O	/	/	/	/	/	9.5	9.5	54.96	1987.72									
			J	S										UNION							
			O											EMPLOYEE							
JOHN A NAROG II	<input checked="" type="checkbox"/>	J	S	8	8	8	8	8	/	/	40	36.64	UNION <input checked="" type="checkbox"/> EMPLOYEE								
			O	/	/	/	/	8	8	54.96	1905.28										
			J	S										UNION							
			O											EMPLOYEE							
DAVID DELPRIORE	<input checked="" type="checkbox"/>	J	S	8	/	/	8	8	/	/	24	41.28	UNION <input checked="" type="checkbox"/> EMPLOYEE								
			O	/	/	/	/	/	/	0		990.72									
			J	S										UNION							
			O											EMPLOYEE							
	<input checked="" type="checkbox"/>	J	S										UNION <input checked="" type="checkbox"/> EMPLOYEE								
			O																		
			J	S										UNION							
			O											EMPLOYEE							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE 

PATTI M. SMITH, PRESIDENT

5/3/10

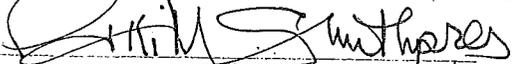
NAME OF CONTRACTOR / SUB-CONTRACTOR: **McCORMACK SMITH CONTRACTING CO., INC.** ADDRESS: **11 BLACK DIAMOND HILL, GARRISON, NY 10524**

PAYROLL No. **1** WEEK ENDING **APRIL 28, 2010** PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) <input checked="" type="checkbox"/> IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS						(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)	
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER	TOTAL DEDUCTIONS		
			HOURS WORKED EACH DAY																		
SAMUEL MARTINEZ	<input checked="" type="checkbox"/>	J A T	S	8	8	8	8	8		40	36.64	1465.60	UNION <input checked="" type="checkbox"/>								
			O							0				EMPLOYEE							
			J											UNION							
			A											EMPLOYEE							
JOSEPH S. SAPIO	<input checked="" type="checkbox"/>	J A T	S					8		8	36.64	403.04	UNION <input checked="" type="checkbox"/>								
			O					2		2	54.96			EMPLOYEE							
			J											UNION							
			A											EMPLOYEE							
JOHN A NAROG II	<input checked="" type="checkbox"/>	J A T	S	8	5	8	8	8		37	36.64	1795.36	UNION <input checked="" type="checkbox"/>								
			O					8		8	54.96			EMPLOYEE							
			J											UNION							
			A											EMPLOYEE							
DAVID DELPRIORE	<input checked="" type="checkbox"/>	J A T J A T	S	8	8	8		8		32	41.28	2146.56	UNION <input checked="" type="checkbox"/>								
			O					2	8	10	82.56			EMPLOYEE							
			J											UNION							
			A											EMPLOYEE							
			J											UNION							
			A											EMPLOYEE							

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE: 

PATTI M. SMITH, PRESIDENT

5/3/10

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 36	JOB NO. 91415	WEEK ENDING 05/05/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED					EARNINGS				DEDUCTIONS		NET PAY						
				STT	O.T.	STT	O.T.	O.T.	REG	VAC	TAXABLE EARNING	OTHER	FED	SOC SEC		OTHER					
21824	CATANIA, VITTORIO	Y	731	LA-ENG LA	M	J	T	S	R	E											
					T	U	F	S	U												
					W	E	D														
			36640	1.5																	
25487	DAOUD, MUAYYAD M	V	731	LA-ENG LA	M	J	T	S	R	E											
					T	U	F	S	U												
					W	E	D														
			36640	1.5																	
35464	FITZGERALD, JOE A	Y	731	LA-ENG LA	M	J	T	S	R	E											
					T	U	F	S	U												
					W	E	D														
			36640	1.5																	
39589	GUEJO, LEONEL GONCA	V	731	LA-ENG LA	M	J	T	S	R	E											
					T	U	F	S	U												
					W	E	D														
			36640	1.5																	
66165	OCEGUERA, ALFONSO	Y	731	LA-ENG LA	M	J	T	S	R	E											
					T	U	F	S	U												
					W	E	D														
			36640	1.5																	
77275	ROYES, NORMAN O	V	731	LA-ENG LA	M	J	T	S	R	E											
					T	U	F	S	U												
					W	E	D														
			36640	1.5																	

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE
B
O
U
R
N
E
E

ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
STATE	VAC	STMP			CITY	UNION	TOT DED	NET EARN	EXP	

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 37	JOB NO. 91415	WEEK ENDING 05/12/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS				DEDUCTIONS				NET PAY												
				STT	O.T.	STT	O.T.	O.T.	REG	TAX	FED	SOC SEC	SUI	GOVERNMENT	OTHER	NET PAY														
40282	HAKOLA, WAYNE E	Y	14	OE-OP ENG	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0		
					TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0
					WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$
					THUR	80	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$		
				TOTAL						TOTAL EARNINGS 101792				TOTAL DEDUCTIONS				30135												
79211	SAMPSON, JOHN H	V	14	OE-OP ENG	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0		
					TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0
					WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$
					THUR	80	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$		
				TOTAL						TOTAL EARNINGS 124544				TOTAL DEDUCTIONS				30136												
19019	BOHM, GARY F	Y	46	LT-LATHER	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0		
					TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0
					WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$
					THUR	40	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$		
				TOTAL						TOTAL EARNINGS 21148				TOTAL DEDUCTIONS				30179												
25454	REID, DANIEL	V	46	LT-LATHER	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0		
					TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0
					WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$
					THUR	40	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$		
				TOTAL						TOTAL EARNINGS 21148				TOTAL DEDUCTIONS				30180												
60137	MCGRATH, PATRICK J	Y	100	CA-CARPEN	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0		
					TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0
					WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$
					THUR	80	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$		
				TOTAL						TOTAL EARNINGS 43184				TOTAL DEDUCTIONS				30098												
25487	DAOUD, MUAYYAD M	V	731	LA-ENG LA	MON	0	TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0		
					TUE	0	WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0
					WED	0	THUR	0	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$
					THUR	80	FRI	0	SAT	0	SUN	0	REG	0	TAX	0	FED	0	SOC SEC	0	SUI	0	GOVERNMENT	0	OTHER	0	NET PAY	\$		
				TOTAL						TOTAL EARNINGS 87936				TOTAL DEDUCTIONS				30108												

CODE 1 OPP. ENG. CODE CLASSIFICATIONS	CODE 2	ST	OT	REG	OT	OTHER	VAC	TAX	FED	SOC SEC	SUI	CHECK TOTAL
	J - JOURNEYMAN A - APPRENTICE T - TRAINEE	STATE	VAC	STMP			CITY	UNION	TOT DED	NET EARN	EXP	

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

**MONTHLY EMPLOYMENT
UTILIZATION REPORT**

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD

MINORITY: _____

FROM: 04/29/10

FEMALE: _____

TO: 05/26/10

This report is required by Executive Order 11246, etc. 202. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

91415 EARLY WKS FOUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY11231

FEDERAL
FUNDING
AGENCY

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES									
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	M	F	M	F						
		M	F	M	F	M	F	M	F	M	F												
14 OE-OP ENGI	Journey worker	138.0	.0	32.0	.0	.0	.0	.0	.0	.0	.0	23.2	.0	4	0	1	0						
	APPRENTICE																						
	TRAINEE																						
	SUB-TOTAL	138.0	.0	32.0	.0	.0	.0	.0	.0	.0	.0												
15 OE-OP ENGI	Journey worker	58.5	.0	22.5	.0	16.0	.0	.0	.0	.0	.0	23.2	.0	4	0	1	0						
	APPRENTICE																						
	TRAINEE																						
	SUB-TOTAL	58.5	.0	22.5	.0	16.0	.0	.0	.0	.0	.0												
29 LA-LA DRIL	Journey worker	8.0	.0	.0	.0	8.0	.0	.0	.0	.0	.0	100.0	.0	4	0	2	0						
	APPRENTICE																						
	TRAINEE																						
	SUB-TOTAL	8.0	.0	.0	.0	8.0	.0	.0	.0	.0	.0												
46 LT-LATHERS	Journey worker											100.0	.0	1	0	1	0						
	APPRENTICE																						
	TRAINEE (F)	65.0	.0	.0	.0	.0	.0	.0	.0	.0	.0							.0	.0	2	0	0	0
	SUB-TOTAL	65.0	.0	.0	.0	.0	.0	.0	.0	.0	.0												
Journey worker	10.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0							
APPRENTICE																							
TRAINEE																							
SUB-TOTAL	10.0	.0	.0	.0	.0	.0	.0	.0	.0	.0													
TOTAL JOURNEY WORKERS														1	0	0	0						
TOTAL APPRENTICES																							
TOTAL TRAINEES																							
GRAND TOTAL																							

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (Include area code)

13. DATE SIGNED

PAGE 1 OF _____

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

MONTHLY EMPLOYMENT UTILIZATION REPORT

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD
FROM: 04/29/10

MINORITY: _____

FEMALE: _____

TO: 05/26/10

This report is required by Executive Order 11246, sec. 202. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

2. EMPLOYERS I.D. NO.

91415 EARLY WKS FOUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL FUNDING AGENCY

6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES				
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	M	F	M	F	
		M	F	M	F	M	F	M	F	M	F							
79 LA-MAS TEN	Journey worker	1.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			1	0	0	0
	APPRENTICE																	
	TRAINEE																	
	SUB-TOTAL	1.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			1	0	0	0
100 CA-CARPENT	Journey worker	65.5	.0	41.5	.0	.0	.0	.0	.0	.0	.0	.0			1	0	0	0
	APPRENTICE											63.4			3	0	1	0
	TRAINEE (F)	5.0	.0	.0	.0	5.0	.0	.0	.0	.0	.0	100.0			1	0	1	0
	SUB-TOTAL	70.5	.0	41.5	.0	5.0	.0	.0	.0	.0	.0				4	0	2	0
731 LA-ENG LAB	Journey worker	653.5	.0	191.5	.0	371.0	.0	.0	.0	.0	.0	66.0			4	0	2	0
	APPRENTICE											86.1			11	0	8	0
	TRAINEE (F)	8.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			1	0	0	0
	SUB-TOTAL	662.0	.0	191.5	.0	371.0	.0	.0	.0	.0	.0				12	0	8	0
	Journey worker																	
	APPRENTICE																	
	TRAINEE																	
	SUB-TOTAL																	
	Journey worker																	
	APPRENTICE																	
	TRAINEE																	
	SUB-TOTAL																	
TOTAL JOURNEY WORKERS		935.0	.0	287.5	.0	395.0	.0	.0	.0	.0	.0	73.0			25	0	13	0
TOTAL APPRENTICES		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			0	0	0	0
TOTAL TRAINEES		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			0	0	0	0
(F)		78.5	.0	.0	.0	5.0	.0	.0	.0	.0	.0	6.4			4	0	1	0
(P)		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			0	0	0	0
(O)		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0			0	0	0	0
GRAND TOTAL		1013.5	.0	287.5	.0	400.0	.0	.0	.0	.0	.0	67.8			29	0	14	0

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (Include area code)

13. DATE SIGNED

PAGE

2 OF _____

Date 6/2/10

I, Robert Fehring President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Fehring Surveying, P.C. on the
(Contractor or Subcontractor)

WTC - Path Foundations that during the payroll period commencing on the
(Building or Work)

1st day of May, 2010, and ending the 31st day of May, 2010.

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Fehring Surveying, P.C. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), Issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

None

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Bernice A. Fehring

BERNICE A. FEHRINGER
Notary Public, State of New York
No. 01FE602 7706
Qualified in Nassau County
Commission Expires July 12, 2011

NAME AND TITLE

Robert Fehring, President

SIGNATURE

[Signature]

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.



MONTHLY EMPLOYMENT UTILIZATION REPORT

USER INSTRUCTIONS:

1. Please read reverse side of this form for detailed instructions
2. Complete all applicable information, leave shaded boxes blank.
3. If more than 1 page is used, complete all information for "TOTAL THIS MONTH" and "GRAND TOTAL TO DATE" on last page only.
4. ALL PRIMES NOTE: This form should reflect an aggregate of your work force and all subcontractors.

This form submitted w/ payment application #	LIST SUBCONTRACTORS INCLUDED IN THIS REPORT (IF ANY)	FOR R.E. OFFICE USE ONLY REVIEWED BY:	PAGE
	1	DATE RECEIVED:	of
	2	Reporting Period	Contract Goals
	3	From: <u>4/1/10</u>	MINORITY
	4	To: <u>4/30/10</u>	Skilled 30 %
	5	% of	Laborer 40 %
	6	Completion	FEMALE
7		Skilled/Labor 6.9 %	Actual Start Date

Project Title:
WTC Path Foundations
Contract # or TAA #:
WTC 614.001 W015
Location:
WTC - NYC

Prime Contractor's Name:
T. Moriarty & Son, Inc.
Address:
63 Creamer St.
Phone:
Brooklyn, NY 11231
Prepared By: _____ Date _____

WORK HOURS OF EMPLOYEES

#1 Construction Trade	#2 Classification	#3 Total All Employee Hours		#4 Sum of All Employee Hours		#5 Black		#6 Hispanic		#7 Asian		#8 Native American		#9 Total Minority Hours	#10 % Minority Hours	#11 % Female Hours	#12 Total Number of Employees		#13 Total Number of Minority Employees	
		M	F	(Add 3M + 3F)	M	F	M	F	M	F	M	F	(Add 5 thru 8)	(#9 DIV #4)	(#3F DIV #4)	M	F	M	F	
Surveying	JOURNEY WORKER	16	0	16	-	-	-	-	-	-	-	-	-	-	-	-	2	0	0	0
	APPRENTICE																			
	SUBTOTAL	16	0	16	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0
	JOURNEY WORKER																			
	APPRENTICE																			
	SUBTOTAL																			
	JOURNEY WORKER																			
	APPRENTICE																			
	SUBTOTAL																			
TOTAL THIS MONTH	TOTAL JOURNEY WORKER	16	0	16	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0
	TOTAL APPRENTICE																			
	TOTAL SKILLED TRADES																			
	LABORERS																			
GRAND TOTAL FROM LAST MONTH	SKILLED TRADES	443	0	443	0	0	0	0	0	0	0	0	0	0	0	0				
	LABORERS																			
GRAND TOTAL TO DATE	SKILLED TRADES	459	0	459	0	0	0	0	0	0	0	0	0	0	0	0				
	LABORERS																			

For R.E. Office Use Only
Reviewed By: _____
Date: _____
Are Goals Being Met? Circle One
Minority Female
Yes No Yes No

COMPANY OFFICIAL'S SIGNATURE AND TITLE: Robert Fehringer, President DATE SIGNED: 6/2/10
*Superintendents' hours should not be included in this form. NOTE: The MEUR must be submitted within 5 business days of month end.

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/> SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																	
FEHRINGER SURVEYING, PC		2200 Jackson Avenue, Seaford, New York 11783																	
FEIN	FOR WEEK ENDING	PROJECT AND LOCATION						PROJECT OR CONTRACTOR NO.											
	May 8, 2010	WTC PATH: Foundations & Stair Modifications						WTC-614.001 WO#15											
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST of OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	OTHER	TOTAL DEDUCTIONS	
				3	4	5	6	7	8							--			
Avraam Papazoglou		8601		8							8	52.47							
Frank Van Brunt		8601		8							8	41.11	328.88						

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS															
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783															
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.							
		May 15, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15							
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST of OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	--	OTHER	
Avraam Papazoglou		8601		10	11	12	13	14	15	16		52.47							
								NO											
Frank Van Brunt		8601						WORK				41.11							

WEEKLY PAYROLL

For Contractor's Optional Use. Use of this form meets payroll notification requirements; as stated on the Payroll Records Notification.

NAME OF CONTRACTOR <input type="checkbox"/>		SUBCONTRACTOR <input checked="" type="checkbox"/>		ADDRESS																
FEHRINGER SURVEYING, PC				2200 Jackson Avenue, Seaford, New York 11783																
FEIN		FOR WEEK ENDING		PROJECT AND LOCATION								PROJECT OR CONTRACTOR NO.								
		May 22, 2010		WTC PATH: Foundations & Stair Modifications								WTC-614.001 WO#15								
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	NO. OF WITH-HOLDINGS	WORK CLASSIFICATION	ST or OT	DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	S				FICA	WITH-HOLDING	NY w/h	---	OTHER		TOTAL DEDUCTIONS
				Hours Worked																
Avraam Papazoglou		8601									52.47									
Frank Van Brunt		8601									41.11									

MAY 17 2010

Date _____

I, RUSSELL RANDAZZA PRES.
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

PROVEN ELECTRICAL CONTRACTING, INC. on the
(Contractor or Subcontractor)

IC-614,001 - W.O. #15; that during the payroll period commencing on the
(Building or Work)

29TH day of APRIL, 2010, and ending the 5TH day of MAY, 2010

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

PROVEN ELECTRICAL CONTRACTING, INC. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

MARGUERITE D'ABBACCO
NOTARY PUBLIC, State of New York
No. 41-4732711 - Putnam County
Term Expires April 19, 2011

Marguerite D'Abbracco

NAME AND TITLE

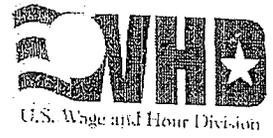
SIGNATURE

RUSSELL RANDAZZA, Pres.

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/esa/whd/forms/wh347instr.htm)



Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTRACTOR PROVEN ELECTRIC CONTR IN ADDRESS 3484 HAROLD STREET OCEANSIDE NY 11572
 PAYROLL NO. 3 FOR WEEK ENDING 05/05/10 PROJECT AND LOCATION 80438 TMS:WTC-TEMPS PROJECT OR CONTRACT NO. OMB No.: 1215-0149 Expires: 12/31/2011

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST:	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK		
				MON	TUE	WED	THU	FRI	SAT	SUN				FICA	WITH- HOLDING TAX	STATE TAX	LOCAL TAX	OTHER		TOTAL DEDUCTIONS	
				3	4	5	29	30	1	2				HOURS WORKED EACH DAY							
GIORDANO, SALVATORE		JOURNEYMAN	O	1.0	1.0	1.0						3.0	73.50	249.50							
			S	7.0	7.0	7.0							21.0	49.00	1935.50						
VANGELI, ANTHONY		FOREMAN	O	8.0	8.0	8.0	9.0	8.0	9.0			50.0	78.00	4264.00							
			S			4.0	7.0						7.0	52.00	4264.00						
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/esa/whd/forms/wh347instr.htm)
Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division
Rev. Dec. 2008
OMB No.: 1215-0149
Expires: 12/31/2011

NAME OF CONTRACTOR OR SUBCONTRACTOR **PROVEN ELECTRIC CONTR IN** ADDRESS **3484 HAROLD STREET OCEANSIDE NY 11572**

PAYROLL NO. **4** FOR WEEK ENDING **05/12/10** PROJECT AND LOCATION **80438 TMS:WTC-TEMPS** PROJECT OR CONTRACT NO.

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK		
			OT. OR ST.	MON	TUE	WED	THU	FRI	SAT				SUN	FICA	WITH- HOLDING TAX	STATE TAX	LOCAL TAX		OTHER	TOTAL DEDUCTIONS
				10	11	12	6	7	8				9							
TESTA, SALVATOR		FOREMAN	O	8.0							8.0	81.00	648.00							
			S											54.00						
VANGELI, ANTHONY		FOREMAN	O		8.0	8.0	8.0				24.0	78.00	1872.00							
			S		5/5									52.00						
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 6.9.10

I, Karlise Murphy (Name of Signatory Party) President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by Beach Erectors Inc. (Contractor or Subcontractor) on the

(Building or Work) 1st day of May, 2000; that during the payroll period commencing on the 31st day of May, 2000, and ending the 31st day of May, 2000, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Beach Erectors Inc. (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below.

NONE

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
NONE	

REMARKS: Sworn to before me on this 14th day of JUNE 2010

Heather R. Kreuzburg
Notary
HEATHER R. KREUZBURG
NOTARY PUBLIC, State of New York
No. 01KR6221014, Nassau County
Term Expires April 26, 2014

NAME AND TITLE <u>Karlise Murphy</u>	SIGNATURE <u>Karlise Murphy</u>
-----------------------------------------	------------------------------------

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Monthly Employment Utilization Report

U.S. Department of Labor

Employment Standards Administration - Office of Federal Contract Compliance Programs

This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

1. Covered Area (SMSA or EA)

2. Employers I.D. No.

OMB No. 1215-01633

3. Current Goals

Minority

Female

4. Reporting Period

From 5/1/2010

To 5/31/2010

Name and Location of Contractor

Beach Erectors, Inc.
54 Alabama Ave.
Island Park, NY 11558

Project and Location

WTC-614.001 Work Order # 15 - Install Only
Steel Stairs & Framing
WTC - Path Station

Federal Funding Agency

5. CONSTRUCTION TRADE	Classifications	6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS										7. Minority Percentage	8. Female Percentage	9. Total Number of Employees		10. Total Number of Minority Employees		
		6a. Total All Employees Bv Trade		6b. Black (Not of Hispanic Origin)		6c. Hispanic		6d. Asian or Pacific Islander		6e. American Indian or Native American				M	F	M	F	
		M	F	M	F	M	F	M	F	M	F							
Ironworker	Journey Worker	28	0	7	0	0	0	0	0	0	0	25.00%	0.00%	4	0	1	0	
	Apprentice	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Trainee	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Sub-Total	28		7		0		0		0						4		1
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Journey Worker																	
	Apprentice																	
	Trainee																	
	Sub-Total																	
	Total Journey Worker	28	0	7	0	0	0	0	0	0	0	25.00%	0.00%	4	0	1	0	
	Total Apprentice	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Total Trainee	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0
	Grand Total	28		7		0		0		0				4		1		

11. Company Official's Signature and Title

Heather R. Kreuzburg, President

12. Telephone Number (Include area code)

516-432-5757

13. Date Signed

June 7, 2010

Page

1 of 1

HEATHER R. KREUZBURG
NOTARY PUBLIC, State of New York
No. 01KR6221014, Nassau County
Term Expires April 26, 2014

Sworn to before me on this 7th

day of JUNE 2010

Heather R. Kreuzburg

Form CC-257

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT <i>TO BE SUBMITTED WITH REQUISITION FOR PAYMENT</i>			AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757	PAYROLL No. 28	TAX I.D. No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15	WEEK ENDING DATE 05/09/2010	PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing		

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8-10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			05/03	05/04	05/05	05/06	05/07	05/08	05/09									
No Work Performed.	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					
	J A H	RT											U					
		OT											E					

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
HEATHER R. KREUZBURG
 NOTARY PUBLIC, State of New York
 No. 01KR6221014, Nassau County
 Term Expires April 26, 2014

Signed to before me on this 23 day of JUNE 2010
Heather R. Kreuzburg

Karlise Murphy NAME (Print)
President TITLE
June 7, 2010 DATE

THE CITY OF NEW YORK - OFFICE OF THE COMPTROLLER - BUREAU OF LABOR LAW

NAME OF PRIME CONTRACTOR T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231		PAYROLL REPORT TO BE SUBMITTED WITH REQUISITION FOR PAYMENT				AGENCY Port Authority of New York and New Jersey	
NAME OF SUBCONTRACTOR Beach Erectors Inc.		ADDRESS 54 Alabama Ave. Island Park, NY 11558		PHONE NO. 516 432 5757		PAYROLL No. 29	TAX ID No.
CONTRACT REGISTRATION # WTC-614.001		JOB CODE Work Order # 15		WEEK ENDING DATE 05/16/2010		PROJECT NAME & LOCATION WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing	

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				RATE PER HOUR	PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID			
			05/10	05/11	05/12	05/13	05/14	05/15	05/16									
			HOURS WORKED EACH DAY															
Ancell Brown	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
Frank Cifuni	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
Peter Triolo	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
Robert Lester	J A H Foreman Ironworker	RT	0	0	0	0	0	0	0	0	41.05	0.00	37.47	U Local 580				
		OT	0	0	0	0	0	7	0	7	61.58	431.06	56.21	E O Vacation				
	J A H	RT												U				
		OT												E O				
	J A H	RT												U				
		OT												E O				
	J A H	RT												U				
		OT												E O				

INSTRUCTIONS ON REVERSE SIDE

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown. I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy

President

HEATHER R. KREUZBERG (Notary)
NOTARY PUBLIC, State of New York
No. 01KR6221014, Nassau County
Term Expires April 26, 2014

Sworn to before me on this 7th

June 7, 2010
DATE

day of JUNE 2010

Heather R. Kreuzberg

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

CONTRACT REGISTRATION #
WTC-614.001

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

JOB CODE
Work Order # 15

WEEK ENDING DATE
05/23/2010

PHONE NO.
516 432 5757

AGENCY
Port Authority of New York and New Jersey

PAYROLL No.
30

TAX I.D. No.

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID				
			05/17	05/18	05/19	05/20	05/21	05/22	05/23									
No Work Performed.	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																
	J A H	RT																
		OT																

INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

This certified payroll has been prepared in accordance with the instructions contained on the reverse side of this form. I certify that the above information represents wages and supplemental benefits paid to all persons employed by my firm for construction work on the above project during the period shown.

I understand that falsification of this statement is a punishable offense.

Karlise Murphy
SIGNATURE

Karlise Murphy

President

HEATHER R. KRIBZBURG
NOTARY PUBLIC, State of New York
No. 01KR6221014, Nassau County
Term Expires April 26, 2014

Sworn to before me on this 7th

day of JUNE 2010
Heather R. Kribzburg

June 7, 2010
DATE

NAME OF PRIME CONTRACTOR
T. Moriarty & Son, Inc. 63 Creamer Street Brooklyn, NY 11231

PAYROLL REPORT

TO BE SUBMITTED WITH REQUISITION FOR PAYMENT

AGENCY
Port Authority of New York and New Jersey

NAME OF SUBCONTRACTOR
Beach Erectors Inc.

ADDRESS 54 Alabama Ave.
Island Park, NY 11558

PHONE NO.
516 432 5757

PAYROLL No.
31

TAX I.D. No.

CONTRACT REGISTRATION #
WTC-614.001

JOB CODE
Work Order # 15

WEEK ENDING DATE
05/30/2010

PROJECT NAME & LOCATION
WTC-614.001 Work Order # 15 - Install Only Steel Stairs & Framing

(1) NAME ADDRESS LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER	(2) LIST TRADE & CIRCLE CLASSIFICATION JOURNEYMAN APPRENTICE (NYS DOL REGISTERED) HELPER	(3) T I M E	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY PER HOUR	(7) TOTAL BASE PAY	(8) (9) (10) SUPPLEMENTAL BENEFITS			(11) GROSS PAY	(12) TOTAL TAX & OTHER DEDUCTIONS	(13) NET PAY
			M	T	W	T	F	S	S				PAID TO (Local # if Union is Checked)	TOTAL BENEFITS PAID				
			05/24	05/25	05/26	05/27	05/28	05/29	05/30									
No Work Performed.	J A H	RT											U					
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				
	J A H	RT												U				
		OT												E				

INSTRUCTIONS ON REVERSE SIDE
FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

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Karlise Murphy
SIGNATURE

Karlise Murphy
President

HEATHER RAMPENBURG
NOTARY PUBLIC, State of New York
No. 01KR6221014, Nassau County
Term Expires April 26, 2014

Sworn to before me on this 27th

day of JUNE 2010

Heather R. Rampenburg

June 7, 2010
DATE

NAME OF CONTRACTOR / SUB-CONTRACTOR

ADDRESS

McCORMACK SMITH CONTRACTING CO., INC.

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.
1

WEEK ENDING
MAY 5, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not incl. Fringes)		
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCTIONS	
			HOURS WORKED EACH DAY																		
SAMUEL MARTINEZ	J	A	S	8	8	8	8	8	/	/	40	36.64	28 1905.	UNION							
			T	/	/	/	/	/	8	/	8	54.96		EMPLOYEE							
			J	S																	
JOSEPH S. SAPIO	J	A	S	/	/	/	/	8	/	/	8	36.64	12 293.	UNION							
			T	/	/	/	/	/	/	/	0			EMPLOYEE							
			J	S																	
JOHN A NAROG II	J	A	S	8	8	8	8	/	/	/	32	36.64	96 1199.96	UNION							
			T	/	/	/	.5	/	/	/	.5	54.96		EMPLOYEE							
			J	S																	
DAVID DELPRIORE	J	A	S	/	/	/	8	8	/	/	16	41.28	76 701.76	UNION							
			T	/	/	/	.5	/	/	/	.5	82.56		EMPLOYEE							
			J	S																	
			S										UNION								
			O										EMPLOYEE								
			S										UNION								
			O										EMPLOYEE								
			S										UNION								
			O										EMPLOYEE								

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

SIGNATURE

Patti M. Smith

PATTI M. SMITH, PRESIDENT

5/7/10

Sworn to before me this 7 day of MAY 2010

Patricia D. Lince
Notary Public

Patricia D Lince
Notary Public, State of New York
No. 0110620199 Qualified in Putnam County
Commission Expires April 12, 2011

Patricia D Lince
Notary Public, State of New York
No. 0110620199 Qualified in Putnam County
Commission Expires April 12, 2011

NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.
1

WEEK ENDING

MAY 12, 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZEN	(3) LIST CRAFT & CIRCLE WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)	
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCT. IONS
			HOURS WORKED EACH DAY																	
SAMUEL MARTINEZ	J	A	S	8	8	/	8	8	/	32	36.64	1337. ³⁶	UNION							
			O	/	/	/	3	/	3	54.96	EMPLOYEE									
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
JOHN A NAROG II	J	A	S	8	8	8	8	8	/	40	36.64	1465. ⁶⁰	UNION							
			O	/	/	/	/	/	0		EMPLOYEE									
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
DAVID DELPRIORE	J	A	S	8	8	8	/	/	/	24	41.28	990. ⁷²	UNION							
			O	/	/	/	/	/	0		EMPLOYEE									
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith
SIGNATURE

PATTI M. SMITH, PRESIDENT

5/13/10

Sworn to before me this 13 day of MAY 2010

Patricia D. Louise
Notary Public



NAME OF CONTRACTOR / SUB-CONTRACTOR

McCORMACK SMITH CONTRACTING CO., INC.

ADDRESS

11 BLACK DIAMOND HILL, GARRISON, NY 10524

PAYROLL No.
1

WEEK ENDING

MAY 19 2010

PROJECT - LOCATION **WORLD TRADE CENTER GENERAL SITE WTC614.001 WO 15**
CONSTRUCTION VIA WORK ORDER FOUNDATION & STAIR MODIFICATIONS

(1) NAME, ADDRESS AND SOCIAL SECURITY No. OF WITHHOLDING EXEMPTIONS	(2) IF US CITIZ	(3) LIST CRAFT & CLASSIF WORK CLASSIF Journeyman Reg. Apprentice Trainee	(4) DAY AND DATE							(5) TOTAL HOURS	(6) BASE RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) TO WHOM FRINGE BENEFITS PAID	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK (Not Incl. Fringes)		
			M	T	W	Th	F	S	S					FICA	WITH-HOLDING TAX	STATE	CITY	OTHER		TOTAL DEDUCT. IONS	
			HOURS WORKED EACH DAY																		
SAMUEL MARTINEZ	J	S	8	8	8	8	8	/	/	40	36.64	1712.92	UNION								
	A	O	/	/	/	/	4.5	/	/	4.5	54.96		EMPLOYEE								
	T	S											UNION								
	J	O											EMPLOYEE								
	A	S											UNION								
	T	O											EMPLOYEE								
JOHN A NAROG II	J	S	8	8	8	8	8	/	/	40	36.64	1520.56	UNION								
	A	O	/	/	/	/	1	/	/	1	54.96		EMPLOYEE								
	T	S											UNION								
	J	O											EMPLOYEE								
	A	S											UNION								
	T	O											EMPLOYEE								
DAVID DELPRIORE	J	S	8	8	8	8	5	/	/	37	41.28	1527.36	UNION								
	A	O	/	/	/	/	/	/	/	0			EMPLOYEE								
	T	S											UNION								
	J	O											EMPLOYEE								
	A	S											UNION								
	T	O											EMPLOYEE								

FALSIFICATION OF STATEMENT IS A PUNISHABLE OFFENSE

I hereby certify that the above information represents wages and fringe benefits paid to all persons employed by my firm for construction work upon the above Project during the period shown. I understand that the above Agency relies upon the information as being complete and accurate in making payments to the undersigned.

Patti M. Smith
SIGNATURE

PATTI M. SMITH, PRESIDENT

6/1/10

Sworn to before me this _____ day of _____

Notary Public

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 40	JOB NO. 91415	WEEK ENDING 06/02/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS				DEDUCTIONS				NET PAY		
				STT	O.T.	STT	O.T.	O.T.	TAXABLE EARNING	OTHER	TOTAL EARNINGS	GOVERNMENT	OTHER	TOTAL DEDUCTIONS						
40282	HAKOLA, WAYNE E	V	14 DE-OP ENG	M	80	T	0	S	0	R	0									
				W	0	F	0	S	0	R	0									
				ED	0	0	0	0	0	0	0									
			57770 20		80		0		80											
																		30402 H		
40282	HAKOLA, WAYNE E	Y	14 DE-OP ENG	M	0	T	80	S	10	R	0									
				W	0	F	80	S	0	R	0									
				ED	80	10	80	0	0	0	0									
			57770 20		80		320		20											
																		30402		
60863	MENDEZ, DANIEL A	V	29 LA-LA DRI	M	0	T	80	S	0	R	0									
				W	0	F	80	S	0	R	0									
				ED	80	0	80	0	0	0	0									
			32080 15		80		320		0											
																		30444		
39589	GUEJO, LEONEL GONCA	V	731 LA-ENG LA	M	0	T	80	S	0	R	0									
				W	0	F	80	S	0	R	0									
				ED	80	0	80	0	0	0	0									
			36640 15		80		320		0											
																		30384		
77275	ROYES, NORMAN O	Y	731 LA-ENG LA	M	0	T	80	S	0	R	0									
				W	0	F	80	S	0	R	0									
				ED	80	0	80	0	0	0	0									
			36640 15		80		320		0											
																		30392		
91146	VIANI, ENRICO	V	731 LA-ENG LA	M	0	T	80	S	0	R	0									
				W	0	F	80	S	0	R	0									
				ED	80	30	80	0	0	0	0									
			39140 15		80		320		30											
																		30396		

VOLUNTARY DEDUCTIONS:
UNION DEDUCTIONS :

CODE 1
OPP. ENG. CODE
CLASSIFICATIONS

CODE 2
G-PAYS
J - JOURNEYMAN
A - APPRENTICE
T - TRAINEE

STATE	VAC	STMP	CITY	UNION	TOT DED	NET EARN	EXP	CHECK TOTAL
-------	-----	------	------	-------	---------	----------	-----	-------------

CONTRACTOR →
SUB-CONTRACTOR →

NAME T MORIARTY & SON INC			ADDRESS 63 CREAMER STREET BROOKLYN NY		
PAYROLL NO. 42	JOB NO. 91415	WEEK ENDING 06/16/10	PROJECT AND LOCATIONS EARLY WKS FOUND		PROJECT OR CONTRACT NO. 61400115

Emp. No.	Name & Address	CODE 1 # DEP CODE 2	SOCIAL SECURITY TRADE RATE - OVERTIME RATE	HOURS WORKED						EARNINGS										DEDUCTIONS				NET PAY					
				STT		O.T.		O.T.		REG	VAC	EXP	ANN	OTH	FWT	GOVERNMENT		OTHER		CHECK NO.									
				S	T	S	T	S	T							S	T	S	T		S	T	S		T	S	T		
77275	ROYES, NORMAN O	Y		M		T		S		R		V		E		O		F		G		O							
				T		H		A																					
				W		F		S		O																			
				TOTAL		160		58624		62624		30572		680															
91146	VIANI, ENRICO	V		M		T		S		R		V		E		O		F		G		O							
				T		H		A																					
				W		F		S		O																			
				TOTAL		160		62624		62624		30572		680															
				M		T		S		R		V		E		O		F		G		O							
				T		H		A																					
				W		F		S		O																			
				TOTAL																									
				M		T		S		R		V		E		O		F		G		O							
				T		H		A																					
				W		F		S		O																			
				TOTAL																									

VOLUNTARY DEDUCTIONS: 150
UNION DEDUCTIONS :

CODE 1 OPP. ENG. CODE CLASSIFICATIONS	CODE 2 8-PAYS J - JOURNEYMAN A - APPRENTICE T - TRAINEE	STATE	VAC	STMP	CITY	UNION	TOT DEF	NET FARN	EXP	CHECK TOTAL
---------------------------------------------	---------------------------------------------------------------------	-------	-----	------	------	-------	---------	----------	-----	-------------

U.S. DEPARTMENT OF LABOR Employment Standards Administration, OFCCP		MONTHLY EMPLOYMENT UTILIZATION REPORT		1. COVERED AREA (SMSA OR EA)		3. CURRENT GOALS MINORITY: _____ FEMALE: _____		4. REPORTING PERIOD FROM: 05/27/10 TO: 06/30/10									
91415 EARLY WKS FOUND		61400115 (MONTH)		NAME AND LOCATION OF CONTRACTOR T MORIARTY & SON INC 63 CREAMER STREET BROOKLYN NY 11231						FEDERAL FUNDING AGENCY							
CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES			
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE						7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE
		M	F	M	F	M	F	M	F	M	F			M	F	M	F
14 OE-OP ENGI	Journey worker	67.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL	67.5	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0				
15 OE-OP ENGI	Journey worker	20.0	.0	4.0	.0	8.0	.0	.0	.0	.0	.0	.0	.0	2	0	0	0
	APPRENTICE											60.0	.0	3	0	2	0
	TRAINEE																
	SUB-TOTAL	20.0	.0	4.0	.0	8.0	.0	.0	.0	.0	.0	60.0	.0				
29 LA-LA DRIL	Journey worker	81.0	.0	.0	.0	81.0	.0	.0	.0	.0	.0	60.0	.0	3	0	2	0
	APPRENTICE											100.0	.0	1	0	1	0
	TRAINEE																
	SUB-TOTAL	81.0	.0	.0	.0	81.0	.0	.0	.0	.0	.0	100.0	.0				
46 LT-LATHERS	Journey worker													1	0	1	0
	APPRENTICE																
	TRAINEE (F)	14.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	0	0	0
	SUB-TOTAL	14.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0				
49 LT-3YRAPP	Journey worker																
	APPRENTICE	7.0	.0	.0	.0	.0	.0	7.0	.0	.0	.0	100.0	.0	1	0	1	0
	TRAINEE																
	SUB-TOTAL	7.0	.0	.0	.0	.0	.0	7.0	.0	.0	.0	100.0	.0				
TOTAL JOURNEY WORKERS														1	0	1	0
TOTAL APPRENTICES																	
TOTAL TRAINEES																	
GRAND TOTAL																	
11. COMPANY OFFICIAL'S SIGNATURE AND TITLE				12. TELEPHONE NUMBER(include area code)				13. DATE SIGNED				PAGE 1 OF _____					

U.S. DEPARTMENT OF LABOR
Employment Standards Administration, OFCCP

MONTHLY EMPLOYMENT UTILIZATION REPORT

1. COVERED AREA (SMSA OR EA)

3. CURRENT GOALS

4. REPORTING PERIOD

This report is required by Executive Order 11246, sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts of federally assisted construction contracts.

MINORITY: _____

FROM: 05/27/10

2. EMPLOYERS I.D. NO.

FEMALE: _____

TO: 06/30/10

91415 EARLY WKS FDUND

61400115

(MONTH)

NAME AND LOCATION OF CONTRACTOR
T MORIARTY & SON INC
63 CREAMER STREET
BROOKLYN NY 11231

FEDERAL FUNDING AGENCY

6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)

CONSTRUCTION TRADE	Classifications	6. WORK HOURS OF EMPLOYMENT (Federal & Non-Federal)										9. TOTAL NUMBER OF EMPLOYEES		10. TOTAL NUMBER OF MINORITY EMPLOYEES			
		6a. TOTAL ALL EMPLOYEES BY TRADE		6b. BLACK (Not of Hispanic Origin)		6c. HISPANIC		6d. ASIAN OR PACIFIC ISLANDERS		6e. AMERICAN INDIAN OR ALASKAN NATIVE		7. MINORITY PERCENTAGE	8. FEMALE PERCENTAGE	M	F	M	F
		M	F	M	F	M	F	M	F	M	F						
100 CA-CARPENT	Journey worker	24.0	.0	24.0	.0	.0	.0	.0	.0	.0	.0	100.0	.0	1	0	1	0
	APPRENTICE																
	TRAINEE																
	(F)	8.0	.0	.0	.0	8.0	.0	.0	.0	.0	.0	100.0	.0	1	0	1	0
	SUB-TOTAL	32.0	.0	24.0	.0	8.0	.0	.0	.0	.0							
731 LA-ENG LAB	Journey worker	286.0	.0	89.0	.0	181.0	.0	.0	.0	.0	.0	100.0	.0	2	0	2	0
	APPRENTICE											94.4	.0	4	0	3	0
	TRAINEE																
		SUB-TOTAL	286.0	.0	89.0	.0	181.0	.0	.0	.0	.0	94.4	.0	4	0	3	0
	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL																
	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL																
	Journey worker																
	APPRENTICE																
	TRAINEE																
	SUB-TOTAL																
TOTAL JOURNEY WORKERS		478.5	.0	117.0	.0	270.0	.0	.0	.0	.0	.0	80.9	.0	11	0	7	0
TOTAL APPRENTICES		7.0	.0	.0	.0	.0	.0	7.0	.0	.0	.0	100.0	.0	1	0	1	0
TOTAL TRAINEES		.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
	(F)	22.0	.0	.0	.0	8.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
	(M)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	36.4	.0	2	0	1	0
	(O)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	0	0	0	0
GRAND TOTAL		507.5	.0	117.0	.0	278.0	.0	7.0	.0	.0	.0	79.2	.0	14	0	9	0

11. COMPANY OFFICIAL'S SIGNATURE AND TITLE

12. TELEPHONE NUMBER (include area code)

13. DATE SIGNED

PAGE

2 OF